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ABSTRACT

The Inactive Health Personnel Project, conducted by the New Jersey Department of Health in 1967, had as objectives to increase the supply of health manpower by locating health personnel and promoting their active employment; to develop the details of health personnel needs by category of personnel and geographic area; and to assist in the return of as many health personnel as possible to active employment. Professional nursing appeared to be the area of greatest need and served as the project's focus. Data were gathered from questionnaires received from 63 percent of the total sample population of 11,490 licensed, inactive professional nurses in New Jersey. Common blocks to employment were low salaries, lack of part-time employment opportunities, need for refresher courses, and lack of child care facilities. Most of the respondents indicated a preference for part-time work in a hospital setting. Twelve recommendations were made toward solving the problems cited by the inactive nurses, expanding the data collection subjects, and initiating programs. A variety of activities followed: conferences, meetings, and additional surveys. (Approximately 100 pages of the document contain appended pertinent data including the survey form, raw data, followup correspondence, and related survey forms.) (AG)

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TITLE PAGE

FINAL REPORT

of the

INACTIVE HEALTH PERSONNEL PROJECT

NEW JERSEY STATE DEPARTMENT OF HEALTH

CONTRACT NUMBER PH 108-67-244
June 27, 1967 through November 30, 1969

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(Appointed June 27, 1967)

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Sincere thanks is extended to those committee members who, in an atmosphere of generous cooperation, offered suggestions and guidelines in the fulfillment of this Inactive Health Personnel Project.

In order to meet the first priority in relation to methodology outlined in the contract, "work with community, area and State organizations, agencies and groups to assist with the identification, contact, and follow-up of inactive health discipline personnel," advisory committees were established and met at intervals.

Those committees were: The Inactive Health Personnel Project Planning Committee, The Health Personnel Ad Hoc Committee, The Nurse Advisory Committee, and The Questionnaire and Programming Committee.

Since so many individuals, organizations, and agencies assisted in the productivity of the Inactive Health Personnel Project, our debt extends well beyond this list of acknowledgements. Most of them can only be thanked anonymously.

Special acknowledgement is due the following New Jersey State Agencies and Professional Associations including:

- Board of Nursing
- Comprehensive Health Planning Agency
- Department of Education
- Department of Institutions and Agencies
- Department of Labor and Industry
- Hospital Research and Educational Trust of New Jersey
- New Jersey State Nurses' Association
- New Jersey League for Nursing
- Licensed Practical Nurse Association
- Dietetic, Medical Technology, Occupational Therapy, Physical Therapy, and Social Work Association

Finally, we are grateful to Joanne Calocerinos, Secretary to the Inactive Health Personnel Project. She offered exemplary secretarial assistance throughout the entire period of the contract.

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INACTIVE HEALTH PERSONNEL PROJECT

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INTRODUCTION

Medical science has advanced more since 1935 than in all the years previous to that date. In the next 15 years, it will probably move forward with giant steps to prove that, by 1985, more medical and technological knowledge will be available to mankind than since the beginning of time.

These advances and newer knowledge will continue to produce a vast array of health services in a wide range of settings. Man, regardless of race, creed, or national origin, has come to value and seek these services with the growing conviction that adequate health care is his inviolable right.

With the advent of Medicare and Medicaid, increased health care insurance plans, and the growing number of health facilities, health manpower has become a critical factor in providing health services. Too, the continuing development of new knowledge and techniques, new patterns of service, and new methods of payment are constantly changing the needs for both numbers and varieties of health workers.

As demands for improved and increased health care are accelerated in the nation, so will they be reflected in New Jersey where the urban population is great. As of July 1, 1967, it was estimated that the State had a population of 7,078,400 and in the same month of 1968, a population of 7,203,510. This indicates an estimated increase of 125,100 persons in one year.

The return of inactive health personnel to active employment is one approach to relieving the health manpower shortage in an attempt to supply needed service to this expanding population. To this end, the New Jersey State Department of Health entered into a cost-reimbursement contract with the Department of Health, Education, and Welfare, Public Health Service, Bureau of Health Manpower (now known as Bureau of Health Professions Education and Manpower Training).

Contract #PH 108-67-244 became effective on June 27, 1967, and was extended through November 30, 1969. A Preliminary Report outlining a plan of action was submitted in July 1967, the Interim Report was mailed in June 1968, and Quarterly Reports were submitted throughout the twenty-nine months of the Inactive Health Personnel Project endeavor.

We consistently evaluated the progress of endeavor in our attempt to meet the objective of the Project through proper use of all data collected. Those data obtained from the initial 1967 survey of inactive, licensed professional nurses, and subsequent surveys, gave us insight into how we might proceed in our attempt to locate inactive health personnel, overcome blocks and barriers to employment, and assist in the placement of skilled health personnel in positions utilizing utmost professional skills in a work situation offering greatest job satisfaction.

Sociological and technological advances have introduced radical changes in our society, and the need for change is not readily acceptable by many who have hued to the traditional manner of employment trends and personnel policies. Employers of health personnel, as well as health workers, must learn to accept the inevitable changes occuring in the framework of our times.

Health personnel, especially professional nurses, are in the upper mobile group, and we know a shortage of nursing personnel occurs when the number of workers increases less rapidly than the number demanded. An improved matching of resources with needs; a better matching of nursing education with nursing services; a rationalization of roles, activities, and utilization of nursing practice are trends for the now and the future.

Ruth B. Stryker says in the April 1969 issue of Nursing Outlook, "It may seem self-evident, but experience bears out a sometimes forgotten truism that when an employer and an employee can meet each other's needs to a reasonable degree, each one's goals become attainable to the benefit of a third party - the patient."

SCOPE OF WORK

Purpose

Since the onset of Contract #P.H. 108-67-244, our purpose has been to uncover facts mitigating against employment of professional health personnel, and develop a plan of action which would assist in their return to active employment.

The Inactive Health Personnel Project focused its attention primarily on professional nursing since that appeared to be where the need was greatest. However, we stimulated other health disciplines to undertake surveys which would uncover valuable information about inactive personnel in their areas of endeavor. Medical Technology, Nutrition and Dietetics, Physical Therapy, and Occupational Therapy have conducted surveys under the aegis of the Inactive Health Personnel Project.

Objective

The overall objective of the Health Personnel Project has been to increase the supply of health manpower by initiating a plan to locate and promote recruitment of health personnel to active employment; to develop the details of health personnel needs by category of personnel and geographic area; to assist in the return of as many health personnel as possible to active employment.

It was also the objective of the Project to assist the Nurse Refresher Program through consultation, and by sharing information regarding candidates interested in taking a nurse refresher course. The Nurse Refresher Program, in existence since July 1, 1965 under the auspices of the New Jersey Hospital Research and Educational Trust, was funded under the Manpower Development and Training Act. Funds supporting the Program terminated on September 20, 1968.

Methodology

The methodology outlined for the Inactive Health Personnel Project was: "Upon activation of the contract, the Contractor shall designate a nurse coordinator who shall, along with the Contractor, carry out the Project. Priorities were established and carried out as follows:

1. Assist with the identification, contact, and follow-up of inactive professional nurses and other health disciplines through communication with community, area, and State organizations, agencies and groups.

2. Develop the details of employment opportunities by category of personnel in a variety of health care facilities including hospitals, nursing homes and home health agencies by geographical area.

3. Determine and define the problems and obstacles currently faced in expanding the availability of health manpower and offer recommendations for their solution.

4. Assist in the placement of skilled personnel in facilities and agencies.

5. Evaluate the effectiveness of the program.

6. Expand existing training programs to provide refresher training courses in light of available trainees and employment opportunities.

7. Assist in the scheduling of the training programs in selected regionally based facilities, close to where trainees are available.

8. Assist in the securing of funds for retraining programs.

9. Provide consultation and assistance in the development of course content and teaching methods for retraining courses.

* * * * * * *

CHAPTER I

PROFESSIONAL NURSING SURVEY, 1967

Collection of Data

Preliminary to the collection of data the Questionnaire and Programming Committee met to discuss wording of the cover letter to accompany the questionnaire, assess questions to be included on the questionnaire, and to determine what we would want to program from the returned questionnaires. See Appendix-1, Appendix-2, Appendix-3.

On October 18, 1967, the 1966 cards of the 11,490 licensed, inactive professional nurses were obtained from the New Jersey Board of Nursing. Using the nurse's license number as the control, the names and addresses from the cards were put on magnetic tape in the Data Processing Program of the Health Department. The cover letter, and questionnaire to be sent to the above inactive nurses, was completed, approved, and mailing completed on November 30, 1967.

Since questionnaires continued to return after the December 15, 1967 deadline, the latter was extended to January 15, 1968 and tabulation of data begun on January 16, 1968. All data was updated as of February 26, 1968, at which time 7,242 or 63.0 percent of the questionnaires had been returned.

In order to determine why some nurses did not respond to the questionnaire, we did a 10 percent sampling of the 4,248 non-respondents. As of June 4, 1968, 146 responded explaining a variety of reasons for not returning the questionnaire. See Appendix-4.

A statement must be made at this time to indicate activity from the onset of the project on June 27, 1967 and the beginning of tabulation of data January 16, 1968 from the questionnaire which we developed and mailed.

Since we would not have our questionnaire ready for mailing before November 30, 1967, we hand tabulated data obtained from a previous questionnaire developed by the Hospital Research and Educational Trust of New Jersey, and mailed by the New Jersey State Employment Service in 1966, using the 1965 list of inactive licensed professional nurses in New Jersey. Working with this data did assist us in uncovering blocks and barriers preventing the employment of those nurses. Through analysis of those data early in the project, we were able to supply Mrs. Mineva Mayberry, Coordinator, since 1965, of the New Jersey Nurse Refresher Program, with the names, and other pertinent information, of 491 inactive professional nurses who wished to participate in a refresher course. From this list she could recruit nurses for the courses. We also supplied the New Jersey Board of Nursing with the names, and other pertinent information, of 48 inactive professional nurses with Masters Degrees. From this list they might recruit nurses for faculty positions.

We were interested in comparing those blocks and barriers to employment with those data tabulated from the new questionnaire we mailed on November 30, 1967.

Interpretation of Data

Appendix-5 presents final statistical data, including tables and explanations, summarized from the questionnaires sent to the 11,490 inactive, licensed professional nurses in New Jersey.

Of the 4,759 nurses who did not respond to the questionnaire, we learned that 338 were deceased or retired, and 173 could not be located. We did learn that of the 6,731 respondents, 2,296 were employed on a full or part-time basis. The Board of Nursing was apprised of these facts. Of the total respondents, 3,631 professional nurses were unemployed in nursing for one or another reason, and 585 checked "other" as their mode of employment. This totals 4,216 persons unemployed in nursing.

Of the 1,712 nurses who checked the time in which they expect to return to work, 525 wished to return to nursing within one year or less, and 1,187 would return in two or more years. Map 1 (Appendix-6) graphically indicates, by county, the number of inactive nurses in each, the number desiring to return to employment in one year or less, and the number seeking information on refresher courses as indicated on the questionnaire. Map 2 (Appendix-7) graphically indicates, by county, the number of inactive nurses in each county, the number desiring to return to employment in two or more years, and the number seeking information on refresher courses as indicated on the questionnaire. Map 3 (Appendix-8) shows a breakdown of the estimated population in each county in New Jersey as of July 1, 1967.

It was a highlight of the survey to note that of the 2,501 nurses who are "definitely" or "probably" planning to return to work, 1,645 indicated they were interested in part-time employment and only 176 would work full-time. Of the total, 661 were uncertain and 19 failed to respond though they were among those who did plan to return to active employment. When we analyzed the primary reasons for their not being currently employed, we could understand a multiple of reasons why most sought part-time employment. The largest number preferred to be at home while their children were young. The second most important reason indicated a need for nurse refresher courses to be continued since many had not been in active practice for a while. Since many said they could not make suitable arrangement for child care, this indicated a need to determine what child care facilities were available in the State.

Upon return to employment, 1,334 of the 2,501 respondents said they would prefer to function in a hospital setting. We found duplication when we asked what position they would be most likely to fill since some nurses checked more than one box to question 17.

The largest number, 3,832, of the total 4,216 respondents had completed a 3-year Diploma Program, and 302 had, as their basic nursing education, attended a 4 or 5-year College Program. Only 25 of the 4,216 nurses returning the questionnaire held a Masters Degree in Nursing, and 30 held a Master's Degree in other than Nursing.

The Department of Health, Education and Welfare, Public Health Service, Bureau of Health Manpower, designed a set of tables which could provide information about the characteristics of the inactive nurse and her interest in returning to active practice. Available information has been tabulated on the appropriate tables. N/A indicates information "Not Available" since we did not gear our questionnaire to uncover those data. Table 1 (Appendix-9-A) through Table 19 (Appendix-9-S) contain requested information.

Disposition of Data

All materials used to collect data, and those data tabulated from the questionnaires mailed to the inactive licensed professional nurses on November 30, 1967, have been shared with the Inactive Health Personnel Project Planning Committee, the Health Personnel Ad Hoc Committee, and the Nurse Advisory Committee. At each meeting, a report on the progress of the project and plans for the future were shared. Recommendations, coming out of our experience, were made which might benefit other health disciplines in the recruitment of health personnel.

Using the format of our above-mentioned questionnaire, Mrs. Margaret P. Zealand, State Consultant, Nutrition, Health, devised and sent questionnaires to 533 nutritionists and dietitians in the State. As of June 14, 1968, there were 403 respondents. Reference will be made to this study in Chapter X.

At our request to the New Jersey State Nurses' Association, an invitation was extended to report to its Board of Directors on the Inactive Health Personnel Project. The report was accepted with interest and several recommendations were forthcoming from the group. See Appendix-10.

We have worked closely with Mrs. Mineva Mayberry, Coordinator, Nurse Refresher Program in promptly ordering Nurse Refresher Course Promotional Kits and other materials which would assist in the conduct of the classes.

We submitted to Mrs. Mayberry an alphabetic control list of the names, and other pertinent information, of the 1,228 nurses who indicated on the 1967 questionnaire that they desired information on refresher courses. This is the second list submitted to Mrs. Mayberry since we compiled, from the 1966 questionnaire, the names of 491 nurses seeking like information.

Mrs. Mayberry sent a questionnaire to those nurses who had completed nurse refresher courses since the Fall of 1965. The purpose of the questionnaire was to determine whether the individual was working or had worked since completing the course. Results of data tabulated are found on Table 15 (Appendix-9-O), Table 16 (Appendix-9-P), Table 18 (Appendix-9-R) and Table 19 (Appendix-9-S).

On June 25, 1968, Mrs. Mayberry met with members of the Nurse Advisory Committee to the Inactive Health Personnel Project. The purpose of the meeting was to ask their assistance in more precisely identifying the direction of the Statewide Nurse Refresher Program.

Conferences have been held with Mr. W. E. Clinton, Sr., Senior Occupational Analyst, M.D.T.A., New Jersey State Employment Service, Division of Employment Security, Department of Labor and Industry. The purpose, to secure from him pertinent information which would assist us in securing funds for retraining programs for health personnel. We also supplied him with the alphabetic control list of the names, and other pertinent information, of the 1,228 nurses who indicated on the 1967 questionnaire that they desired information on refresher courses. It was our feeling this information would strengthen the appeal for monies necessary to continue the refresher courses.

Conferences have been held with Mr. Robert White, Manpower Specialist, Field Operations Service, Division of Employment Security. The purpose to supply him with the names, and other pertinent information, of the 525 nurses seeking employment in a year or less. He has shared this information with the five Nurses Registries conducted by the Division of Employment Security, New Jersey State Employment Service. The Nurse Project Coordinator has visited four of these five Nurses Registries in order to determine how they function with health professionals.

With Mr. White and Mrs. Anne Patterson, President, New Jersey State Nurses Association, a visit was made to the Nurse and Medical Placement Office, Professional Placement Center in New York City. The purpose of this visit was to learn their procedure in the guidance, counseling, and job placement of professional nurses and other health personnel.

Meetings have been held with the five State Public Health Nurse District Consultants to share with them the names, and other pertinent information, of nurses seeking employment in public health nursing. At this writing they are in the process of contacting these people and do not have a firm report of those persons who have returned to active employment through our efforts.

Conferences have been held with Mrs. Christine Hamburg, Chief, Bureau of Psychiatric Nursing Care, to share tabulated data. Information given her might assist in the recruitment of nurses into psychiatric and mental health institutions.

There have been meetings with Mrs. Ida Alphin, Supervisor, State Day Care Services. Since we have uncovered a list of 363 nurses who definitely state they cannot return to active employment because they cannot make suitable arrangements for their children, this gives her additional data indicating a need to investigate present and proposed centers across the State. Visits with Mrs. Alphin have been made to three Day Care Centers in Newark to determine how they are used by health professionals. There was little to indicate that they were used by this professional group.

Conferences were held with C. F. Culp, M.D., Director, Division of Health Facilities, State Department of Health. The purpose of these conferences was to share with him all data relevant to nurses seeking employment, especially those nurses seeking employment in nursing homes and/or extended care facilities. As Director of the Division of Health Facilities, Dr. Culp is responsible for health facilities under Title XVIII (Medicare). As such, he is especially concerned with the adequate coverage by health personnel of New Jersey's Nursing Homes and/or extended care facilities, which show the greatest needs at this time.

A list of names, and other pertinent information, of professional nurses desiring employment in nursing homes was also supplied the New Jersey Nursing Home Association.

We have assisted the New Jersey Practical Nurses Association in their effort to establish refresher courses for licensed practical nurses. We have brought their officers together with Miss Joan Birchenall, Supervisor, Health Occupations, Division of Vocational Education and with Mr. Wrightson E. Clinton, M.D.T.A., Department of Economic Security. The latter two persons are in a position to see that refresher courses are made available for the upgrading of the practical nurse.

We have also been in touch with the President of the New Jersey Society of Medical Technologists since she sought information about refresher courses and possible monies available for training medical technologists. Our purpose for contacting her was to supply information received in a letter from Mr. Curtis C. Aller, Chairman, National Coordinating Committee, CAMPS. His letter stated the CAMPS National planning guidelines for FY 1969 call for devoting well over half of M.D.T.A. training resources earmarked for shortage occupations to health occupations. Monies would then be available for refresher training in the area of medical technology.

The New Jersey State Board of Nursing has been supplied the names, and other pertinent information, of 20 inactive, licensed, professional nurses holding a Masters Degree in Nursing, and like information of 9 inactive, licensed professional nurses holding a Masters Degree in other than Nursing. From this list they might recruit nurses for faculty positions. This marks the second such data supplied them since we gave them a list of 48 names early in the project, based on the anlaysis of returns from a previous questionnaire.

Nurses' Comments

In the "Remarks" section of the questionnaires, and in letters returned with them, many nurses chose to enlarge upon their response to the questions. In so doing they presented interesting highlights as to their feelings relevant to reasons why there is a shortage of Professional Nurses in New Jersey.

In a profession which demands the utmost dedication to the patient in whatever situation the nurse finds herself, some feel the levels of professional responsibility should be increased. Some were critical of the level of professionalism in today's nursing because, too often, other than professional nurses were given too much responsibility in the actual care of the patient. They feel this lowered their status in the mind of the patient, and they often equated low status with low salaries.

Many indicated a need for increased salaries, particularly in hospitals, and for more part-time employment. Some felt better utilization of nursing skills might allow for more part-time employment and more flexible working hours for married women.

A large number of nurses expressed a need for day care centers, especially in hospitals, where their small children could be cared for while they worked. To this end, some felt the larger hospitals or the Federal Government might sponsor day care centers. This would provide for a larger net salary since the high cost of child care in the home would be obviated, and it would release more married nurses, with children, to seek employment.

Since the critical nurse shortage has been widely publicized, the findings of this survey come as no surprise. The response to the questionnaire would indicate the nurses' awareness of the need, and what appears to them to be possible solutions to the shortage problem.

The following excerpts present a random sampling of favorable impressions, criticism to personnel policies and utilization of skills, and possible measures to be taken if nursing is to be made a more attractive profession:

"Was delighted to participate in a refresher course late in 1966, at Passaic Valley Hospital, in the evening, which is why I could attend. While introducing me to new equipment, the course also helped me to realize I had not forgotten the basics of nursing. I am able to work at the hospital only a few hours a month but feel that when I have time to return to nursing, which I love, I will not be hindered by lack of confidence in making my decision."

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"Would truly enjoy doing nursing again, but with small children, feel I should only work evenings when husband is at home. Don't feel salary earned would offset the disruption to family life. Have decided to wait until children are both in school, then absence would not have an effect upon family."

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"Because of tremendous changes in profession, feel that I would prefer to return to college for degree before returning to the field. An individual's outlook in her forties would more likely be to contribute to her profession and for professional stimulation rather than a matter of economics."

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"No reason why I can't work except the high responsibility with low wage. Have taken care of some 70 patients in one 8-hour shift and some patients were critical. Do not feel, as an individual, that I can live with myself for not giving adequate care to those who need it due to heavy patient load on one nurse. At night I would come home and stay awake hours trying to remember if I did all that had to be done. I became a nervous wreck and my family insisted that I quit. Feel higher wages would at least give some incentive."

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"Bemoan fact that nursing duties revolve almost entirely around desk and telephone, and patient care is assigned to personnel such as aides."

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"I think the questionnaire was an excellent idea and I commend you on your effort to obtain information. Will it be published."

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"I am writing to compliment you on the excellent job you are doing for the nurses in New Jersey. Thank you for everything you are doing."

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"Feel that employment opportunities are very limited in nursing field in Ocean County. Do not plan on remaining in this area after graduation from Seton Hall."

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"Hospital nursing at present seems terrifying. Could not stand rush and confusion of busy hospital. Old-fashioned bedside nursing seemed to be my speed."

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"With five children between the ages of 1 and 7, it is impossible to leave them. I feel I should take a refresher course every couple of years to stay informed but this too, is impossible. I have thought of arranging a non-active nurse group that would meet monthly, have access to films and demonstrations that might relieve this knowledge gap."

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"General duty in one department is fine, but due to lack of staff nurses you are reassigned each night in a different department. This does not make for good nursing care. Too often older nurses are treated like maids or aides by many of the foreign exchange students and nurses."

"I am returning the enclosed questionnaire you sent me. I have just been hired by a nursing home part-time at my hours and the days I can give and they seemed very pleased to have me come in. This was quite a different approach than the one's I have received at the various hospitals. Thank you for your interest, but I think I shall be quite pleased now."

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"Hospitals could obtain more working R.N.'s if they would be willing to split shifts and drop compulsory weekend and alternate holiday working schedules, especially on part-time level where many nurses who are employed are married with family responsibilities. Nurses should be compensated with additional pay for the extra duties they must assume because of shortage in help, primarily in the hospital situation."

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"I recall from student days the appreciation we had for the "part-time outside-grad" who worked while children were in school. She was another pair of hands so all had more time for good bedside attention. Now nursing offices are insulted when one offers to work part-time on week days only!!!"

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"To work day duty, nursery care would have to be made available. Volunteer R.N.'s doing professional work would fill a shortage gap on the wards, just as many of these women give their time to the community. Married women usually do not require a salary, but a sense of fulfillment, and of having done something worthwhile with their time. Husbands that violently object to their wives "working" seem to take pride in volunteer services rendered."

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"The Hospitals that are providing a child care center I feel are most beneficial. If there was a hospital near me with this service, I would be there. I would like to see something done along these lines of child care."

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"I took a refresher course at St. Barnabas Hospital February 1967. It was invaluable. In addition, this hospital had a baby-sitting service which is in operation for nurses' children at a nominal charge of $1.25 per day. I can't help but feel if more hospitals explored this idea they could get help, and even without refresher courses being necessary."

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"Position of the profession is due to inadequate salary scale maintained over the years, and the extremely independent and uncooperative attitude of administrative personnel."

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"As a result of the 1967 questionnaire, and through your efforts, I am working part-time on a program in Vital Statistics, New Jersey State Department of Health. Three other nurses who were inactive are working with me."

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"Nurses returning to duty are not properly oriented to head nurses duty on each ward, but this duty has been dropped into the nurse's hands improperly. A conscientious nurse likes to know all proper procedures before having this responsibility. Salary was too low, especially part-time. Aides and L.P.N., it appears, have taken too much responsibility."

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"Have been out of nursing ten years. From listening to some of the girls still working it is observed that they are pressured to do more work than they can handle and much too much paper work still involved. I enjoy bedside nursing, not secretarial work and want to work for the patient."

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"From observations, especially in two local hospitals, poor patient care seems to arise more from inadequate supervision and use of auxiliary help rather than a shortage. So many supervisory personnel are lacking in training or experience to assume such responsibility. Because of lack of qualified personnel, recent graduates who have seniority are given responsibilities whether qualified or not."

"I am very glad that more state colleges are now offering a degree in the nurses program."

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"Interest, such as yours, influenced my decision to return to nursing. Thank you for doing an excellent job in keeping track of inactive nurses."

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"Push the two-year nursing program. It may phase out the three-year program leaving the two-year and college degree program. By keeping the standards high on the two year program, there will be a faster "turn-out", and the nursing shortage gap will be filled."

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"Local hospital has been wonderful in allowing me to work one or two nights (11 - 7) per week. This way I have no baby-sitting problem and can keep myself up-to-date in nursing. Other hospitals would have more evening help if they would allow R.N.'s to work suitable hours."

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"As you well know, nurses spend years being trained; their knowledge and skills are needed so very desperately; every institution cries of the nursing shortage; the nurses themselves want to work, and many need to work, but how can we?"

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"Do you not think it possible, in addition to raising the salaries, for the State to also subsidize some sort of day care center at the hospitals so that we with young children and some spirit left, can at least, eliminate the homemaker cost from our so-called salary?"

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"If nursing could be made a more respected profession for men, and paid a salary a man could support a family on, this could be an answer in the future."

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"Competent baby sitters are difficult to find. Rate charged for sitting (usually $1.00 per hour) is putting a burden on the nurse unless her pay is substantial enough to meet it. Must have dependable sitter or work I do will not be my best."

Recommendations Concomitant To Professional Nursing Survey, 1967

It is hoped that as working conditions and salaries improve, and as health facilities attempt to utilize more professional nurses on a part-time basis, the supply of health workers will increase. Too, as educational facilities are financially strengthened and increased, greater numbers of health personnel will be released to function in the health manpower field.

The extension of Contract #PH 108-67-244 offered us an opportunity to implement findings and work more closely with potential employers and employees. Since we were working with people and ideas, the extension allowed us to work through these recommendations:

1. Establish regional conferences in the four New Jersey State Health Districts for the purpose of meeting with inactive, licensed professional nurses who indicated, on the 1967 questionnaire, that they sought specific guidance and counseling.

2. Explore existing child care facilities, and promote extension of this resource by informing hospital administrators, upon request, of the steps to be taken if they wish to establish child care centers in their hospitals.

3. Share with the employers of health personnel information regarding blocks and barriers mitigating against employment.

4. Conduct surveys of inactive, licensed professional nurses which will give us data concerning number of nurses who have returned to active employment; fruitfulness of the meetings held with professional nurses and nursing service directors; determine number of professional nurses who have taken nurse refresher courses, and numbers desiring to take the courses.

5. Share with administrators of hospitals, nursing homes, extended care facilities and community health agencies the names and addresses of nurses seeking employment.

6. Continue to cooperate with the New Jersey Hospital Research and Educational Trust by supplying them with the names and addresses of nurses seeking nurse refresher courses. Assist in the continuation of the nurse refresher program since it has proven its worth and many nurses still seek the courses.

7. Collect pertinent data regarding the effectiveness of the nurse refresher program as required by Article I, Contract PH 108-67-244, Modification #4.

8. Continue to work with community, and State groups in order to assist them in utilizing pertinent data made available through the Inactive Health Personnel Project Surveys and Activity.

9. Upon notification from the New Jersey State Board of Nursing that their 1968 statistical information regarding licensed, professional nurses is available, obtain this for processing in the Data Processing Program of the New Jersey State Department of Health. This is a valuable source of data and should be kept up-dated yearly following the termination of the Inactive Health Personnel Project.

10. Stimulate one area of the State to undertake a feasibility study regarding a Substitute Nurse Service, and provide staff assistance insofar as possible.

11. Continue to work with other health disciplines in implementing plans for surveying inactive health personnel in their areas of endeavor.

12. Work with the New Jersey Employment Service, Division of Employment Security, Department of Labor and Industry, in an endeavor to place personnel in positions in which they can make the maximum contribution.

13. Conduct appropriate committee meetings for the purpose of evaluating progress of the Inactive Health Personnel Project and proceed with recommendations.

CHAPTER II

REGIONAL CONFERENCES WITH INACTIVE, LICENSED PROFESSIONAL NURSES

Of the 1,142 inactive nurses who indicated on the November 1967 questionnaire that they planned to return to employment in three years, 47 were living out-of-state so they were not contacted. In order to reach the 1,095 nurses, we developed a letter for the purpose of inviting each to one of the twelve meetings arranged for 1:30 P.M., across the State between August and October of 1968. See Appendix-11.

Since the purpose of these meetings was to offer guidance and counsel to those seeking employment, it was important to have answers to the kinds of information they were seeking. As the tear-off section of the letter was returned, the questionnaires of those nurses planning to attend were carefully analyzed, needs determined, and specific information collected and studied.

Of the 584 nurses who responded to the letter, 57 indicated they were now working. This came as no surprise since telephone contact had been made previously with some of these nurses in order to direct them to employers seeking one with their skills and abilities. It is interesting to note that of the large number who responded saying they were unable to attend, the four most important reasons were:

1. I cannot make suitable arrangements for my small children.
2. Have family responsibilities.
3. Transportation is difficult to arrange.
4. Time of meeting does not permit attendance.

The five Public Health Nurse Consultants in the State Department of Health made arrangements for the meeting places and were invited to attend since they would serve as resource persons in the counsel and guidance of nurses seeking specific information in answer to their needs. Those areas of information requested on questionnaires, letters, and calls from nurses were:

1. Positions available in hospitals, nursing homes, extended care facilities, and other health facilities.
2. Location of employment agencies.
3. Availability of nurse refresher courses.
4. Availability of school nurse certification courses, and procedure to be followed when applying for a New Jersey Teacher Certificate.
5. Universities and colleges in New Jersey offering courses in nurse education.
6. Trends in nurse education.
7. Availability of nurse traineeships, scholarships, and loan funds.
8. Bibliography including books, journals, pamphlets, periodicals, etc.

9. Location of New Jersey State Approved Nursery Schools.

10. Employment standards.

In attendance at the twelve meetings were 165 nurses and 55 nursing service directors and administrators. As the nurses expressed a need for assistance, information was given them or they were referred to persons with the expertise to assist.

In order to determine the success of the twelve meetings, cards were mailed to the 165 nurses who attended. See Appendix-12. The purpose of the follow-up was to determine work status and other pertinent information. As of this writing, 149 nurses responded. An analysis of the data follows:

1. 49 of the 149 respondents are now employed in nursing.
2. 4 are employed full-time.
3. 45 are employed part-time.
4. 4 are employed in other than nursing.
5. 25 of the 149 respondents had taken a nurse refresher course.
6. 10 of the 49 employed had taken a nurse refresher course.
7. 15 of those who took a nurse refresher course are not employed.
8. 130 of the 149 respondents felt the meetings worthwhile.

Many indicated it was the stimulus of the meetings and information shared which motivated their return to nursing. With this in mind, we felt it advisable to conduct further meetings which could assist in the return of inactive nurses to active employment.

In April of 1969 we mailed letters of invitation to 1,903 inactive nurses who had said on the November 1967 questionnaire that they planned to return to employment in 1 to 5 years. See Appendix-13. This number included those unable to attend the twelve meetings held in 1968. Across the State, during May and June 1969, a total of six meetings were held at 1:30 P.M.

Nursing service directors, in-service education directors and administrators of various health facilities were invited to the meetings in order to share information about job opportunities available in their health facilities. The State Department of Health, Public Health Nurse Consultant, in whose health district the meeting was held, also attended to offer valuable guidance and assistance. Information was offered which covered the ten areas where guidance was consistently sought. In attendance at the six meetings were 69 inactive, professional nurses and 80 nursing service directors, etc. The four most important reasons nurses were unable to attend remained the same as had been stated in the first group of meetings.

In order to determine the success of the six meetings, cards were mailed to the 69 nurses who attended. See Appendix-14. The purpose of the follow-up was to determine work status and other pertinent information. As of this writing, 65 nurses have responded. An analysis of the data follows:

1. 18 of the 65 respondents are now employed in nursing.
2. 5 are employed full-time.
3. 13 are employed part-time.
4. 4 of the 65 respondents had taken a nurse refresher course.
5. 1 of the 18 employed had taken a nurse refresher course.
6. 3 of those who took a nurse refresher course are not employed.
7. 58 of the 65 respondents felt the meetings worthwhile.

Throughout the eighteen meetings problems and obstacles mitigating against return to active employment were freely discussed, and resource persons in the group offered solutions. Among these solutions were explanation of institution and agency personnel policies, employment opportunities, and invitations to meet individually with the inactive nurses to work through blocks and barriers relating to employment. The administrators and nursing service directors expressed their pleasure in having the opportunity to meet and talk with the inactive nurses. The nurses said it was gratifying to know there were persons anxious to offer assistance on a one-to-one basis in a climate of understanding and interest.

Following are but a few of the comments made by nurses who attended the eighteen meetings:

> "These meetings allow us to get together and talk over problems. They don't seem so great when you know people are interested and want to help."
>
> "Thank you for your help and encouragement to motivate me to accept a full-time position."
>
> "Would very much like to attend another meeting. Nurse friends who are now inactive want to be alerted to future meetings."
>
> "The meeting I attended was stimulating and gave me courage to want to return to nursing. Because of it, am now employed part-time and plan to return to full-time employment in the Fall.
>
> "The meeting with other inactive nurses was the most stimulating thing that has happened to me in a long time. Plan to return to nursing because of it."
>
> "Thank you for holding meetings across the State with inactive nurses. The meeting I attended was informative and all your efforts are greatly appreciated."
>
> "The questionnaire motivated me to return to part-time employment and the meeting to full-time employment."

"Learned so much at the meeting. Thank you for your interest in me and my fellow inactive nurses."

"Many of us deeply appreciate what the State Department of Health is doing to get inactive nurses back to work."

"Please keep me informed of all future meetings. I know of a number of inactive nurses who would like to attend."

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CHAPTER III

CHILD CARE FACILITIES

Inactive nurses consistently repeat that one of the important reasons they are unable to return to active employment is, "I cannot make arrangements for child care". With this is mind, we determined the location of Approved Nursery Schools in New Jersey. As of May 7, 1969, there were 569 such nursery schools located in twenty of the State's twenty-one counties. The exception being Cape May County.

The State of New Jersey, Department of Education, Early Childhood Education, has set Standards For Approval of Child Care Centers. These standards have been established in order that the program provide for all phases of a child's physical, social, emotional, and mental development.

Definite rules and regulations as to procedure for operating such a center, personnel qualifications, physical facilities, health care, and transportation are clearly spelled out in the booklet Standards For Approval Of Child Care Centers (the child from two to five) issued by the State of New Jersey, Department of Education, Trenton, 1967.

This booklet was discussed at each meeting attended by nursing service directors, etc., and inactive, professional nurses. The purpose was to acquaint the former whom they should contact if their health facility wished to establish such a center. Through the establishment of same, they might be able to recruit nurses who would return to active employment if they had a place nearby to leave their children in safe care while they worked. The inactive nurses were given the names of the State Approved Nursery Schools in their vicinity so that they might explore the possibility of utilizing such a service where their children could be cared for while they worked.

We have no way of knowing how many nurses utilized this service. At this writing, we are able to determine that there are only three hospitals in New Jersey conducting day nurseries. The daily fee is minimal and enrollment is limited to the individual needs of hospital employees. This service has assisted in the return of inactive nurses to active employment.

CHAPTER IV

SHARING NAMES OF NURSES SEEKING EMPLOYMENT

It must be singularly understood that the New Jersey State Department of Health is not an employment agency nor have we set ourselves up in the Inactive Health Personnel Project so to appear. Contract PH 108-67-244 tells us to, "assist in the placement of skilled personnel in facilities and agencies". We have the names and addresses of licensed professional nurses seeking employment; the health facility or agency manages the recruitment.

Our November 1967 survey of inactive professional nurses indicated that 2,501 nurses definitely or probably expected to return to work in the future. The fold-out sheets, by county, containing the names, addresses and other pertinent information about these individuals were supplied us by the Department of Health, Data Processing Program. The Inactive Health Personnel Project had made this possible, and was the only known facility in the State to have available such valuable information which could be supplied to potential employers.

To date, we have mailed these fold-out sheets to 103 hospitals, extended care facilities, nursing homes, and community health agencies in the 21 counties of the State. Appendix-15 is a sample letter accompanying the material.

All have written or telephoned expressing their gratitude for the information. Many tell us they have employed nurses from the list, the large majority on a part-time basis. Time has not allowed surveying this large number of health facilities to determine the exact number of nurses whom they employed. We do know that 3,794 nurses who were unemployed when we ran our 1967 survey are now employed. See Appendix-16.

It is also interesting that we have been called by persons conducting other surveys in New Jersey and have been able to supply them with this valuable information which assists them in their studies.

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CHAPTER V

CONDUCT SURVEY OF INACTIVE, LICENSED PROFESSIONAL NURSES

In April 1969, we surveyed the 2,333 nurses who indicated on the November 1967 questionnaire that they definitely or probably would return to active employment sometime in the future. See Appendix-17 and Appendix-18. Final tabulation of the 1,396 (59.8%) respondents from the 21 counties reveals interesting data as to the work status of 408 nurses, and place of employment; number employed who completed a nurse refresher course, would like to take such a course and time preferred; if they did take a course, their intent to work full or part-time. The 988 unemployed nurses supplied information as to the number who had and had not taken a nurse refresher course, their interest in future courses, and intent to work.

Appendix-19 (Table 1) shows 408 of the 1,396 respondents working. Of this group, 66 were employed full-time and 335 were working part-time. This would indicate that more and more health facilities across the State are making a concerted effort to utilize the hours the nurses can make available. Hospitals commanded the largest number, 208, while 59 were employed in schools, 53 in nursing homes, and the remaining 88 were active in other areas of nursing.

Factors which influenced the nurses' decision to return to employment are listed in order of importance:

1. Availability of part-time employment.
2. Improved salaries.
3. Motivation and interest.
4. Children are older.

Appendix-20 (Table 2) tells us that of the 408 nurses working, the greatest number, 57, were employed in urban Bergen County with an estimated population in the year 1968 of 913,520. Only 57 had completed a nurse refresher course, but 100 said they would be interested in future courses with the largest majority, 62, desiring to take the course in the evening. Since only 57 of the 408 employed did take a course, other factors induced the return of the 351 nurses to active employment. An important factor is improved health facility in-service education and orientation programs.

Appendix-21 (Table 3) gives a breakdown of the 100 employed nurses who would continue to work if they did take a nurse refresher course. Only 2 would find it convenient to work full-time, 53 could continue working part-time, and 45 did not state whether they would change working hours.

Appendix-22 (Table 4) indicates 988 of the 1,396 respondents are unemployed. Of the 988, only 37 had taken a nurse refresher course and 622 had not taken such a course. It is interesting that 329 chose not to answer the question as to whether they had or had not taken a course. In this unemployed total, 445 were interested in future nurse refresher courses with the largest majority preferring it during the day time. This is logical since they are not working. Only 367 of the 445 who were interested in future courses indicated they would return to active employment with an overwhelming 346 planning to work part-time.

Their reasons for not being employed follow the general pattern we have uncovered in all surveys. Those reasons follow in order of importance:

1. Have small children at home.
2. Family responsibilities.
3. Have been inactive too long.
4. Employer cannot utilize hours I have available.

The names and addresses of the 100 employed nurses and the 445 unemployed nurses seeking nurse refresher courses were compiled by County. At this writing, we have supplied 22 hospitals across the State with lists they requested. Should they plan to conduct nurse refresher courses now or in the future, the lists provide a valuable source of information from which they might recruit nurses for courses or employment.

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CHAPTER VI

NURSE REFRESHER PROGRAM

Between July 1, 1965 and September 20, 1968, Manpower Development and Training Act (MDTA) funds had been available to the New Jersey Hospital Research and Educational Trust (HRET) to conduct the State Nurse Refresher Program. On September 20, 1968, these funds were terminated.

The responsibility of the Inactive Health Personnel Project to the Nurse Refresher Program was to assist in the recruitment of nurses wishing to take a nurse refresher course; make available Nurse Refresher Course Promotional Kits designed by the American Nurses' Association, and other American Nurses' Association visual aid material mailed to us from Design Center, Washington, D. C., and offer financial assistance. It was our purpose to dove-tail function and offer assistance without duplication of effort.

We supplied Mrs. Mineva Mayberry, Coordinator, Nurse Refresher Program, with close to two thousand (2,000) names, addresses, and other pertinent information of professional nurses seeking nurse refresher course information. From these lists she could recruit nurses to take courses when and where they were to be conducted.

Since the American Nurses' Association teaching materials for nurse refresher courses were mailed to the Inactive Health Personnel Project for dispersal, we delivered this to Mrs. Mayberry. She distributed these teaching aids to hospital personnel conducting the courses.

With MDTA funds no longer available after September 20, 1968, HRET sought other sources of income to support the Program. Twelve hospitals had given indication of their interest in offering nurse refresher courses in the Fall of 1968. Eight hospitals discontinued plans to conduct courses when it was learned MDTA funds were no longer available to support the Program.

The New Jersey State Department of Health provided a grant of five thousand six hundred and sixty ($5,660) dollars from October 1, 1968 to December 31, 1968. The purpose of the grant was to permit the staff to continue performing necessary project activities while exploring ways to allow for the continuation of the Nurse Refresher Program. Appendix-23 is the Final Report of the Nurse Refresher Program.

The report indicated that 1,071 professional nurses had taken a nurse refresher course between July 1, 1965 and December 31, 1968. Mrs. Mayberry submitted to us the names and addresses of 757 of the total 1,071 nurses. Throughout the final year of the

Inactive Health Personnel Project, contact was made with hospitals in an attempt to locate the names and addresses of the 314 nurses not included in the 1,071 total. It was important to obtain this information in order to determine how many of these nurses were employed. The obtainable names and addresses of 1,003 nurses have been correlated with the December 31, 1968 statistical information received from the New Jersey Board of Nursing in August 1969. Appendix-24 gives breakdown, by County, of the 585 employed and 418 unemployed nurses in the year 1966 who took a nurse refresher course in 1965 and 1966.

Appendix-25 shows breakdown, by County, of the 664 employed and 339 unemployed nurses in the year 1968 who took a nurse refresher course between 1965 and 1968. It is favorable that 79 more nurses who took a nurse refresher course were employed in 1968 than in 1966. It would be interesting to run such a correlation for the year 1969 but statistical material from the New Jersey Board of Nursing would not be available for that year until the summer of 1970.

During the Fall of 1968, and the Spring and Fall of 1969, thirteen hospitals conducted nurse refresher courses.

1. Number of refresher courses privately sponsored = 13
2. Number of trainees enrolled = 139
3. Number of trainees completing course = 105
4. Number who have returned to work part-time = 60
5. Number who have returned to work full-time = 11
6. Number who have not returned to work and reasons = 34

The reasons the 34 nurses did not return to work were:

1. Family responsibilities
2. Have moved out of area or State.
3. Cannot work weekends and children are too young to leave.

Two hospitals had 25 trainees enrolled with 21 still in class at this writing. We do not know how many of the 21 will complete the course and/or will return to active employment.

Nurse refresher courses continue to be requested by inactive nurses, and the Inactive Health Personnel Project has directed these persons to hospitals who have, are, or will conduct courses in the future. Many hospitals have been contacted since September 20, 1968, in an effort to determine whether they plan to continue courses. Most say they find it unfeasible since too many nurses take the course but then find "reasons" why they cannot return to work. However, we have supplied 22 hospitals across the State with the names and addresses of nurses seeking nurse refresher courses.

Throughout this Project, it has been found that giving nurse refresher courses to inactive nurses is a commendable effort, and has precipitated the return to employment of nurses who would not otherwise return to the manpower force. It is not the complete solution to nurse manpower shortage but it is a remedial effort.

With twelve community colleges in existence in New Jersey, some may be interested in establishing nurse refresher courses in their nursing education program. Since education belongs in the hands of educators, it is hoped they will give due consideration to the continuation of such courses. See Appendix-26, a letter indicating the need for continuation of nurse refresher training which it is hoped will be brought to the attention of chairmen of community college nursing programs.

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CHAPTER VII

ANALYSIS AND CORRELATION OF NEW JERSEY BOARD OF NURSING STATISTICS

Analysis of the New Jersey Board of Nursing December 31, 1968 licensed professional nurse statistics indicates breakdown of numbers of nurses and their area of employment in the 21 counties in the State. An examination of the 1966 and 1968 statistics is as revealing as it is interesting. Analysis follows:

	Active RN's In State	Inactive RN's In State	Licensed RN's In State
12/31/66	27,285	11,490	48,049
12/31/67	29,589	11,233	50,410
12/31/68	31,079	11,264	52,395

These figures indicate 3,794 more nurses employed in 1968 than in 1966, and 4,346 more nurses licensed in the State in 1968 than in 1966.

It is difficult to account for the stability of the inactive nurse total, 11,264, in the year 1968 as against the inactive nurse total, 11,490 in the year 1966. These Board of Nursing figures would indicate a decrease of only 226 inactive nurses between the years of 1966 and 1968.

Many of these so-called Inactive Nurses may be the newly licensed and not yet employed; young married nurses pregnant or with small children they cannot leave; those seeking employment at a time when they are available for only part-time or split-shift involvement; those retired nurses who do not desire to return to employment, and those who have sought positions in other than nursing.

Appendix-27 shows population and number of nurses employed in each of the 21 Counties.

Appendix-28 indicates population by County, number of nurses employed in each, and the increase in number of nurses employed in each County in the year 1968.

This latter is an interesting bit of data since it reveals there has been a substantial increase in the number of professional nurses who have returned to active employment. Each county shows an increase with a State total of 3,794 more nurses in the work force in 1968 than in 1966. We have already indicated in this report that only 664 of the employed nurses took a nurse refresher course between July 1965 and December 1968.

Upon further examination of the December 31, 1968 Board of Nursing Statistical Chart, we note these facts about nurses' Field of Employment:

Increased RN's Employed December 31, 1968 over December 31, 1966

Hospital or other Institution	2,867	increase
School of Nursing	10	increase
School Nursing	19	increase
Industrial Nursing	3	increase
Other and No Information	1,034	increase
	3,933	Total

Decreased RN's Employed December 31, 1968 Over December 31, 1966

Private Duty	129	decrease
Public Health	2	decrease
Office Nurse	8	decrease
	139	Total

The difference between the 139 decrease of nurses in the 3 Fields of Employment, and the 3,933 increase in the 5 Fields of Employment accounts for the 3,794 increase of nurses employed in New Jersey in the year 1968 over the year 1966.

In August 1969, we received from the New Jersey Board of Nursing 52,368 cards of the professional nurses licensed in New Jersey. It was not possible to obtain 1969 statistical information since this would not be available until late summer of 1970.

Our purpose for securing these cards was to enable the State Department of Health Data Processing Program to correlate these data with information received from the Board of Nursing in 1967. Correlation of the year 1968 with the year 1966 data would allow us to determine identification and quantity of nurses who had returned to active employment; identification and quantity of those now inactive; those who moved out-of-State; the identification of the newly licensed professional nurses.

This is valuable information to be kept in the Department of Health Data Processing Program since it can be used by other groups wishing names and addresses, by County, of nurses who may be brought back into the nurse manpower field. This data should be up-dated yearly in the Program.

From the 52,368 cards received we were able to identify only the names and addresses, by county, of all the licensed nurses, and the field of employment of those active in nursing. Though a great deal more information is requested by the Board of Nursing on the renewal cards, other information we had hoped to obtain had not been punched by them on the cards, and the Data Processing Program could not assist our Inactive Health Personnel Project with other than information supplied by the New Jersey Board of Nursing.

Appendix-29 shows correlation of the year 1968 to 1966 employment status of licensed, professional nurses, by County, in New Jersey. This offers abundant data to support the fact that professional nurses do occupy the upper mobile group of professional workers. This is a country-wide finding and further supports the contention that the Law of Supply and Demand does not hold in nursing. Retirees outstrip re-entrants.

When we deduct out-of-State nurses licensed in New Jersey, we find thought-provoking statistics about the employment status of the licensed nurses in the year 1968 over the year 1966:

2,235	Remained Inactive in New Jersey in 1968
24,245	Remained Active in New Jersey in 1968
6,764	Moved from Active to Inactive
6,407	Moved from Inactive to Active
2,696	Were newly licensed in 1967 and 1968 in New Jersey
42,347	Total in State
10,021	Currently licensed in New Jersey, but out-of-State
52,368	Total licensed, professional nurses in New Jersey when correlation was done by New Jersey State Department of Health, Data Processing Program in August 1969.

* * * * * * *

CHAPTER VIII

COMMITTEE MEETINGS AND ACTIVITY WITH COMMUNITY AND STATE GROUPS

Committee meetings were held at intervals throughout the 29 months of the Project. The committee which met most frequently was the Inactive Health Personnel Project Planning Committee. Members of this group were representatives of community and State organizations interested in professional manpower shortage, and sharing information which would assist in the return of inactive health personnel to active employment. Through these meetings we learned significant facts about activity in areas of health manpower and offered assistance where requested. The final meeting was held on November 17, 1969.

Practical Nursing

Representatives from the New Jersey Licensed Practical Nurses' Association did attend meetings from now and then. Their concern was not with conducting a survey of inactive practical nurses, but with upgrading the practical nurse licensed by waiver.

The Health Occupations Unit, Division of Vocational Education, State Department of Education, conducted a survey of practical nurses licensed by waiver in New Jersey. Of the 4,711 practical nurses surveyed, 53% responded, with more than 1,200 indicating that if a program was established whereby they were given an opportunity to upgrade their status they would enroll. In response to this survey a program was started in April 1969 at the Monmouth County Area Vocational-Technical School, and another program begun in October 1969 at the Union County Area Vocational-Technical Institute.

The purpose of the programs was to prepare practical nurses, licensed by waiver, to take New Jersey State Board of Nursing Practical Nurse Examinations. The courses were set up to run for one year on a part-time basis. Upon completion of the courses those who passed the New Jersey State Board Examinations would be known as Licensed Practical Nurses, licensed by examination. Appendix-30 supports meaning to the effort.

The New Jersey Board of Nursing indicates that as of December 31, 1968, there were 12,089 licensed practical nurses working and 2,041 inactive in New Jersey.

Dental Health Program

Representatives from the State Dental Health Program reported at committee meetings but did not request assistance from the Inactive Health Personnel Project.

In 1968, the Program sent questionnaires to active and inactive New Jersey Licensed and Non-Licensed Dental Hygienists in the State. The non-licensed were surveyed since dental hygienists cannot function in New Jersey unless they pass a State Board Examination. From the survey came 60 applications for a refresher course.

The State Department of Health sponsored the refresher course with 20 applicants in attendance. The course was conducted 8 hours a day for one week at Fairleigh Dickinson University School of Dental Hygiene. All took the State Board Examination, all passed, and the 20 dental hygienists have returned to active employment.

New Jersey State Employment Service, Division of Employment Security, Department of Labor and Industry

Our November 1967 questionnaire indicated that 525 nurses would seek employment within a year or less. Of this number, 118 wished their names to be released immediately for employment. These names were carefully checked on the fold-out sheets containing the 525 names and supplied the New Jersey State Employment Service.

The Service referred these names to the 5 State Professional and Commercial Placement Offices, each conducting a Nurses' Registry. A report from the Service in February 1969 indicated that attempts were made to contact the 118 professional nurses. Only 54 nurses responded to the contact, 9 said they were working, 9 did register with one or another of the placement offices, the remainder were neither interested nor available, and none were known to have been placed in any position offered.

One cannot help but be struck with the irrelevance attendant upon nurses' request for assistance, and their response to efforts bent in an attempt to place them in a work situation. We do know from a multitude of nurse's comments that they prefer not to apply for a position through a commercial placement office conducted by an employment service which is not completely professionally geared. We learn from representatives of other health disciplines that personnel in their fields of endeavor voice like feelings.

Conferences were held with representatives of the New Jersey State Employment Service, Division of Employment Security in an attempt to determine what might be done about having health professionals serve on a consultation basis in The Division's Professional and Commercial Placement Offices conducting nurses' registries. Our purpose was to assist them in procedure and mechanism in the guidance, counseling, and job placement of nurses and other health personnel.

Nothing came of this venture since representatives from the State Service and Division felt the consultation offered by their placement offices was serving its purpose.

CHAPTER IX

SUBSTITUTE NURSE SERVICE

Professional nurses continue to seek guidance and counsel as to availability of positions. They ask for job satisfaction through utilization of their skills and wish to feel secure in that this utilization of ability can be arranged during the time they have available to function in a health facility.

Careful analysis of the "Substitute Nurse Service Feasibility Study", conducted by the Health Council of Monroe County, Inc., December 1967, has led us to believe that such a venture might be undertaken in New Jersey. If we go back to the words of Ruth B. Stryker, "when an employer and an employee meet each other's needs to a reasonable degree, each one's goals become attainable to the benefit of a third party - the patient", we find need to carefully consider looking into such a Service in New Jersey.

The Inactive Health Personnel Project has uncovered, among many other facts, the hypothesis that many inactive professional nurses wish not to be inactive. Their skills are there to be utilized but a myriad of reasons prevent their functioning on the traditional three 8-hour shifts over the twenty-four hour day. If they were able to control, to a reasonable degree, their working schedule a significant number of nurse hours would be contributed to the community.

The establishment of a Substitute Nurse Service in New Jersey might well be one answer to assisting nurses to function when available thereby relieving nurse manpower shortage.

1. Such a Service might establish a Clearing House which could match nursing hours available with nursing deficits on a day-to-day basis.
2. Substitute duty nurses could be given flexibility in selecting time on-the-job by working with the Clearing House.
3. Health facility employer's request for temporary nurse help could be matched with the nurse employee's availability.
4. The substitute nurse could be counted on to be available only to those health facilities with whom she negotiated.
5. It would be essential that the substitute nurse be given a suitable orientation program and placed in the clinical specialty befitting her skills.

There is no way of knowing that such a Service might serve a purpose in New Jersey. However, the fact is, many so-called inactive nurses wish to contribute learned skills to nursing. They are saying, loud and clear, that they want to get back to the bed-side of the patient.

With the thought that such a Service might be attempted in New Jersey, meetings and other personal contacts were made with the Hospital and Health Council of Metropolitan New Jersey, Inc. See Appendix-31. Issues of The Monroe County Health Council, "Substitute Nurse Service Feasibility Study" were purchased by the Inactive Health Personnel Project and distributed to members of the Nursing Committee of the Hospital and Health Council. Appendix-32 gives evidence of our response to their request that we explain the purpose and meaning of such a Service. The committee will discuss the feasibility of such an undertaking at their January 1970 meeting.

* * * * * * *

CHAPTER X

ASSIST HEALTH DISCIPLINES IN THE CONDUCT OF SURVEYS

Under the aegis of the Inactive Health Personnel Project, representatives from other health disciplines attending the Inactive Health Personnel Project Planning Committee meetings were urged to conduct surveys of inactive personnel in their fields of endeavor if they felt such a study was warranted.

A survey of the occupational status of dietitians and nutritionists in New Jersey was conducted in 1968. Representatives from Medical Technology, Occupational Therapy, and Physical Therapy decided to run a like survey in 1969.

Meetings were convened for the purpose of developing a uniform questionnaire design and survey methodology. Survey materials used in the collection of data re: the 1967 Professional Nurse Survey and the 1968 Dietitians and Nutritionists Survey were shared with representatives from the 3 disciplines so that they might adapt the cover letters and questionnaires to their use and need.

The collection, analysis, and implementation of findings was the responsibility of the health discipline conducting the survey. The outcome of each survey was shared with the Inactive Health Personnel Project Director and Coordinator. Funds from the Project covered cost of printing the cover letters, the questionnaires, supplying envelopes and postage, and the concerted effort of the excellent secretary to the Inactive Health Personnel Project, Joanne Calocerinos.

DIETITIANS AND NUTRITIONISTS SURVEY

Appendix-33 is the cover letter used in this survey. Appendix-34 is the questionnaire, and Appendix-35 presents statistical analysis of data summarized from the questionnaires, explanations, and implementation of data.

Of the 533 dietitians and nutritionists surveyed, 403 responded. Of this number, 267 were employed, 134 were not employed, and 2 persons made no response as to their employment status.

Information obtained in this survey has been used by District Nutrition Consultants in an effort to match employee with employer. The Nutrition Program, Committees, and Association will contact persons wishing to return to work; canvass the employment potential, by County; share the information with educational institutions planning courses.

MEDICAL TECHNOLOGY SURVEY

In September 1969, this survey was undertaken for the purpose of "Finding A Way To Help Medical Technologists Return To Work". Appendix-36 is the cover letter developed for use in this study. Appendix-37 is the questionnaire, and Appendix-38 (pages 1 thru 16) provide pertinent explanations and excellent statistical data summarized from the questionnaires.

Of the 910 medical technologists surveyed, 486 responded. Of this number 214 were employed, 166 were not gainfully employed, 46 were employed as other than nedical technologists, and the remaining 60 were either deceased, had moved out-of-State, or the questionnaire was returned as address unknown.

It is interesting that recently the National Committee for Careers in Medical Technology signed a $31,000 contract with the United States Department of Labor for the purpose of recruiting inactive medical technologists and to encourage training programs.

With the assistance of the Inactive Health Personnel Project, statistical data uncovered in the Medical Technology Survey should well assist in "recruiting medical technologists and encourage training programs".

OCCUPATIONAL THERAPY SURVEY

In October 1969, the New Jersey Occupational Therapy Association mailed 286 questionnaires to all occupational therapists living in New Jersey. Appendix-39 is the cover letter prepared for use in this survey. Appendix-40 is the questionnaire, and Appendix-41 presents statistical analysis of data summarized from the questionnaires.

Of the 286 occupational therapists surveyed, 117 responded. Of this number of respondents, 62 were employed as occupational therapists, 36 were not gainfully employed, and the remaining 19 served as volunteers or were employed in other fields of endeavor.

No comment was offered as to how the Occupational Therapy Association planned to implement data presented in Appendix-41. However, these data will be presented to the Board of Directors of the New Jersey Occupational Therapy Association for study and follow-up action.

PHYSICAL THERAPY SURVEY

In September 1969, the New Jersey State Department of Health Physical Therapy Consultant, Health, sent questionnaires to 627 professionally qualified physical therapists living in New Jersey for the purpose of updating the current physical therapy roster. Appendix-42 is the cover letter developed for use in this survey. Appendix-43 is the questionnaire, and Appendix-44 gives statistical analysis of data summarized from the questionnaires.

Of the 627 physical therapists surveyed, 333 responded. Of this number of respondents, 90 stated they were unemployed. However, 38 of the 90 said they planned to return to active employment.

Data summarized from this survey will be used in an attempt to reactivate the unemployed physical therapists as well as develop educational facilities to train additional personnel.

CHAPTER XI

EVALUATION

Chapter One through Ten presents Significant findings, Problems encountered, and Conclusions drawn. How work was accomplished, Contributions of other health agencies, and Dissemination of data have been delineated.

Throughout the twenty-nine months of the Project, constant evaluation permitted us to build upon what had been accomplished and set new goals. Data was continuously sought and studied in an effort to fulfill the objectives of the contract.

Each extension of the Contract allowed us to maintain a high level of communication between the State Department of Health, other State agencies, professional associations, and groups concerned with health manpower. Since considerable data had been collected and analyzed, it was imperative that this valuable information be shared with others interested in solving problems relevant to the health manpower shortage.

The health manpower group most hampered by shortage was found to be professional nursing. This shortage maintains in the more rural areas of New Jersey. In these less densely populated areas, transportation is difficult; health facility personnel policies are not always sufficiently flexible to utilize working hours the nurses can make available; economic incentives are not always inducive to attracting inactive nurses back to active employment; work opportunities utilizing the skills and abilities of the nurse are not always available. These are but a few of the reasons which need further study in order to alleviate conditions causing professional nurse manpower shortage.

It is difficult to assess the true overall success of the Project until activities, begun under the aegis of the Project, are undertaken by other groups interested in developing specific plans appropriate to alleviating health manpower shortage in New Jersey. Valuable information has been collected and this resource material is available to those who should consider further implementation of findings.

Activities, undertaken in fulfillment of the Project's objectives have met with success since we know that:

1. There are 3,794 more licensed, professional nurses employed upon termination of the contract in November 1969, than were employed at its onset in June 1967. A variety of factors, and dove-tailing of effort, made possible this increase in the professional nurse work force.

2. Collection and interpretation of data obtained through surveys of inactive nurses allowed us to share names and addresses of potential employees with 103 health facilities. Such action assisted in recruitment of nurses on both a full and part-time basis.

3. Regional conferences with inactive nurses and nursing service directors offered an opportunity for the potential employee and employer to share thinking in response to each other's needs. Also, these meetings allowed us to offer guidance and counsel to nurses seeking specific information and opened up new channels of communication.

4. In close cooperation with the New Jersey Nurse Refresher Program, we were able to assist them in the recruitment of nurses wishing to take a nurse refresher course. Upon termination of the Program's contract with MDTA in September 1968, we were able to share names and addresses of nurses seeking nurse refresher courses with 22 hospitals conducting or contemplating the conduct of such courses.

5. Through the efforts of the Project, a data bank of licensed, professional nurses in New Jersey has been established in the State Department of Health Data Processing Program.

6. With the assistance of the Project, four other health disciplines; nutrition, medical technology, physical therapy, and occupational therapy, conducted surveys in an endeavor to assist in recruitment and determine need for the establishment of training programs. Information collected and analyzed formed the basis for each discipline to establish a manpower data bank.

7. The following endeavors were stimulated and encouraged:
   a. The establishment of a Substitute Nurse Service.
   b. Increased Child Care Centers as a part of health facilities.
   c. The establishment of a Professional Consultation and Placement Service to serve all health personnel - Statewide.
   d. The conduct of nurse refresher programs under the aegis of community colleges.

8. Many inactive nurses are seeking educational programs which will enhance their abilities to render high quality nursing care in this time of rapid medical and technological change.

* * * * * * *

CHAPTER XII

RECOMMENDATIONS

Based on the activities of the Inactive Health Personnel Project, the following general recommendations are made:

1. Continue work already started under this Project regarding inactive health personnel. Major responsibility should be taken by the New Jersey State Department of Health. The continuation includes maintenance of health manpower data banks, analysis of data, and the use of data by appropriate groups in implementing plans for alleviating health manpower shortage. One person within the Department should be given primary responsibility for coordinating this material and effort, and serve as a knowledgeable contact point within the State regarding health manpower.

2. Establish a professional counselling and placement service for health workers within the State. Major responsibility should be taken by the New Jersey State Employment Service, Division of Employment Security, Department

of Labor and Industry. A successful service such as this is maintained in New York City and could serve as a pattern to meet the needs of health professionals in New Jersey.

3. Provide refresher training on a broader professional base to include more psychiatric nursing, public health nursing, and nursing care in long term care facilities. Major responsibility should be taken by the New Jersey State Department of Higher Education in cooperation with the New Jersey Council of Associate Degree Nursing Programs.

4. Vigorously promote and establish educational opportunities in university and college settings for nurses seeking continuing education. Major responsibility should be taken by the New Jersey State Department of Higher Education.

5. Imaginative educational programs should be designed to assist the inactive health professionals to keep abreast of newer techniques and knowledge. The use of educational media such as programmed instruction, television, professional films, and the educational telephone network should be given a high priority for study and implementation. The major responsibility for such programs belongs to professional associations.

6. Continue to encourage and assist in the development of a Substitute Nurse Service in New Jersey. Such a service would make it possible to utilize skills of nurses who are not able to work the traditional three eight-hour shifts or regularly scheduled part-time hours during the 24-hour day.

7. Encourage administrators of health facilities to reflect upon need for change in personnel policies, particularly utilization of part-time nursing personnel. Consideration should be given to establishing four 6-hour shifts over the 24-hour day.

8. Promote a survey of all facilities providing health services to determine numbers and category of currently unfilled budgeted positions, and ascertain projections necessary to meet future health manpower needs. Devise a system which will keep this information up-to-date on an annual basis. Such information would assist in matching health employee's skills with health employer's needs; determining what needs to be done in the distribution and utilization of available health personnel; development of orientation programs to prepare the health professional to fill her role. Major responsibility should be assumed by the New Jersey State Department of Health Comprehensive Health Planning Agency.

9. Encourage administrators of health facilities to consider the establishment of child care centers as an adjunct of the facility. A primary reason why health professionals are unable to return to active employment is because "they cannot make suitable arrangements for the care of their children". Such a service supplied where the health professional is employed might well induce inactive personnel to return to the health manpower work force.

10. Increase efforts to coordinate all projects, programs and activities having health related goals and objectives. Coordination should be maintained at both the State and local level in order to foster communication between groups concerned with alleviating the health manpower shortage.

APPENDICES

OF

PERTINENT

DATA

ROSCOE P. KANDLE, M.D., M.P.H.
STATE COMMISSIONER OF HEALTH

APPENDIX-1

RALPH T. FISHER, M.P.H., Director
Division of Special Consultation Services

State of New Jersey
DEPARTMENT OF HEALTH
P.O. BOX 1540, TRENTON, N. J. 08625

Dear Professional Nurse:

The New Jersey State Department of Health has recently entered into a contract with the Division of Nursing, Bureau of Health Manpower, United States Public Health Service, to study the present professional nurse shortage in New Jersey. Although the Department will take the major responsibility for the study, it will be a cooperative effort with other branches of State Government and appropriate professional groups. To make this study meaningful, your help is urgently requested.

In December 1966 you may have been one of the licensed, inactive professional nurses in this State who received a questionnaire that was sent out jointly by the Division of Employment Security, State of New Jersey, and the Hospital Research and Educational Trust of New Jersey. More than 4,000 nurses returned that questionnaire and anlaysis of the answers has given us invaluable information.

We have now obtained the 1966 list of inactive professional nurses from the New Jersey Board of Nursing and, at the request of the United States Public Health Service, we are mailing a revised questionnaire to the 11,490 licensed, inactive nurses in the State. Hopefully, the answers will give us additional information regarding problems and needs that prevent the employment of a large number of inactive nurses.

Subsequent action, following the analysis of data collected, will be to stimulate further development of programs for retraining and/or placement of professional nurses seeking employment. Through this survey we should be able to identify an immediate work force.

Your cooperation will be greatly appreciated, and we feel you will be making a valuable contribution to your profession. Please complete and return the enclosed questionnaire by December 15, 1967.

Your individual questionnaire will be kept confidential.

Sincerely,

Geraldine R. S. Schiavone

Geraldine R. S. Schiavone, R.N., M.A.
Nurse Project Coordinator

GRSS:dd

APPENDIX-2

State of New Jersey

DEPARTMENT OF HEALTH

JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

1 COUNTY IN WHICH YOU RESIDE

ZIP CODE

2 AGE

MARITAL STATUS
1. ☐ Single 2. ☐ Married 3. ☐ Widowed 4. ☐ Separated 5. ☐ Divorced

3 EMPLOYMENT STATUS – Check the ONE item that most nearly represents your situation.
1. ☐ Employed Full Time
2. ☐ Employed Part Time
3. ☐ Not Gainfully Employed
4. ☐ Other (Specify) ______

NOTE: If you checked 1 or 2 above, DO NOT COMPLETE the remainder of this questionaire. If you checked 3 or 4, ANSWER THE REMAINING QUESTIONS. In either case, please return the questionaire.

4 What type of program was your basic nursing education?
1. ☐ Hospital (3 Yr. Diploma Program) 2. ☐ Junior College (2 Yr.) 3. ☐ College (4 or 5 Yr.)

5 What Degree(s) do you hold in nursing?
1. ☐ None 2. ☐ Associate 3. ☐ Baccalaureate 4. ☐ Masters

6 What Degree(s) do you hold other than Nursing? (indicate major)
1. ☐ None 2. ☐ Baccalaureate ______ 3. ☐ Masters ______ 4. ☐ Doctorate ______

7 Select from the reasons below, the ONE you consider most important for your not being currently employed as a nurse and enter "1" by that reason. If there is a second most important reason, enter "2" by that reason.

01 ☐ Employment opportunities in my field are not available locally.
02 ☐ Employers cannot utilize the working hours I have available.
03 ☐ I cannot make suitable arrangements for the care of my children.
04 ☐ Transportation is difficult to arrange.
05 ☐ I am enrolled as a student obtaining further preparation in nursing.
06 ☐ The salary that I would receive would not make it worthwhile.
07 ☐ I am not able to secure domestic help which would be needed if I returned to work.
08 ☐ Health does not permit my return to nursing.
09 ☐ I have not been in active practice for a while.
10 ☐ I prefer volunteer community activities.
11 ☐ I prefer to be at home while my children are young.
12 ☐ I am no longer interested in nursing as an occupation.
13 ☐ I am retired from nursing.
14 ☐ Other (Specify) ______

(Continued on reverse side)

8 Do you expect to return to work as a nurse at anytime in the future?
1. ☐ Definitely Yes 2. ☐ Probably Yes 3. ☐ Uncertain 4. ☐ Probably No 5. ☐ Definitely No

NOTE: If you checked 1 or 2, answer ALL the remaining questions. If you checked 3, 4 or 5, DO NOT complete the remaining questions. In either case, please return the questionaire.

9 How many children under 18 at home? ____________

10 Age of Youngest Child. ☐ Less than 1 year or ________ years old

11 How long has it been since you worked as a nurse? ☐ Less than 1 year or ______ number of years.

12 How soon do you intend to return to work? ☐ Less than 1 year or in______ years.

13 When you return, will you work? 1. ☐ Full Time 2. ☐ Part-time 3. ☐ Uncertain

14 Would you like to receive information on Refresher Courses planned for 1968? 1. ☐ Yes 2. ☐ No

15 Within the next 12-18 months, could you attend a Refresher Program that would orient you to current nursing practices? 1. ☐ Yes 2. ☐ No

16 Which of the following Refresher Courses would you find convenient to attend?
1. ☐ 8:30 - 3:00 Daily 2. ☐ 9:00 - 3:30 Daily 3. ☐ Evening/Weekend Program

17 Which of the following positions would you be most likely to fill?
1. ☐ Staff Nurse
2. ☐ Head Nurse
3. ☐ Supervisor
4. ☐ Instructor
5. ☐ Consultant
6. ☐ Uncertain
7. ☐ Other (Specify)____________________

18 Please check ONE of the following fields in which you would most like to work.
01. ☐ Hospital
02. ☐ Private Duty
03. ☐ Industrial
04. ☐ Public Health
05. ☐ School
06. ☐ Nursing Education
07. ☐ Doctors Office
08. ☐ Nursing Home
09. ☐ Undecided
10. ☐ Other (Specify)____________________

19 Please check ALL fields in which you have been employed as a nurse and check the highest position you attained in that field.

Field	1. Staff Nurse	2. Supervisor	3. Head Nurse	4. Instructor	5. Consultant	6. Other(Specify)
1. ☐ Hospital	☐	☐	☐	☐	☐	☐ ________
2. ☐ Private Duty	☐	☐	☐	☐	☐	☐ ________
3. ☐ Industrial	☐	☐	☐	☐	☐	☐ ________
4. ☐ Public Health	☐	☐	☐	☐	☐	☐ ________
5. ☐ School	☐	☐	☐	☐	☐	☐ ________
6. ☐ Nursing Education	☐	☐	☐	☐	☐	☐ ________
7. ☐ Doctor's Office	☐	☐	☐	☐	☐	☐ ________
8. ☐ Nursing Home	☐	☐	☐	☐	☐	☐ ________
9. ☐ Other (Specify)	☐	☐	☐	☐	☐	☐ ________

20 Remarks:

M5510

APPENDIX-3

PROGRAMMING

1. Alphabetic control list of respondents desiring employment.
2. Alphabetic control list by County of respondents desiring employment.
3. Compilation of factors preventing return to work.
4. Alphabetic control list of all respondents desiring information on refresher courses and/or could take courses at hours specified on questionnaire.
5. Alphabetic list of nurses by County by nursing degree.
6. Alphabetic list of nurses by County by other than nursing degree.
7. a. Field of nursing experience.
    b. Employment area desired.
    c. Position desired.
    d. Desire to work full-time or part-time.
    e. Number of years in which nurse will return to employment.

APPENDIX-4

ROSCOE P. KANDLE, M.D., M.P.H.
State Commissioner of Health

RALPH T. FISHER, M.P.H., Director
Division of Special Consultation Services

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

March 4, 1968

Dear Professional Nurse:

Over 61 percent of the questionnaires mailed to Licensed, Inactive Professional Nurses in New Jersey have been returned.

We are now in the process of investigating obstacles preventing the return of nurses to employment, and seeking answers to these problems. Results of the survey are assisting us in the placement of skilled personnel in facilities and agencies.

At present we are sampling 10 percent of those nurses who did not return the questionnaire. We would appreciate your response as to why you did not return the questionnaire mailed November 30, 1967. Analysis of your response will further assist in our survey.

Please complete the bottom portion, including signature, and return this entire letter at your earliest convenience.

Sincere thanks for your cooperation.

Sincerely,

Geraldine R. S. Schiavone

(Mrs.) Geraldine R. S. Schiavone, R.N., M.A.

MY REASON(S) FOR NOT RETURNING THE QUESTIONNAIRE:

M 5729

SIGNATURE____________________________

APPENDIX-5

INACTIVE HEALTH PERSONNEL PROJECT

Statistical Summary of Questionnaire Sent to Inactive Professional Nurses, November 30, 1967

Of the 11,490 questionnaires mailed, 7,242 or 63.0 percent were returned. Of those returned, 6,731 or 92.9 percent responded to the questions. Those who have died or retired number 338 or 4.7 percent, and 173 or 2.4 percent were returned as "address unknown".

	Number	Percent
Questionnaires Mailed	11,490	100.0
Questionnaires Returned	7,242	63.0
Questionnaires Not Returned	4,248	37.0
Returned	7,242	100.0
Respondents	6,731	92.9
Deceased or Retired	338	4.7
Address Unknown	173	2.4

3. Employment Status

Of the 6,731 respondents, the greatest number, 3,631 or 53.9 percent were unemployed. Those employed full-time numbered 761 or 11.3 percent, and those employed part-time numbered 1,535 or 22.8 percent. Those who did not respond to the question numbered 219 or 3.3 percent, and 585 or 8.7 percent checked "other" as their mode of employment.

4. What Type of Program Was Your Basic Nursing Education?

Regarding this question, if box 1 or box 2 of question 3, EMPLOYMENT STATUS, was checked, and the questionnaire completed, data processing did not punch additional information on the cards.

Of the 4,216 nurses returning the questionnaire, 3,832 or 90.9 percent had completed a 3-year Diploma Program; 56 or 1.3 percent had attended a 2-year Junior College; 302 or 7.2 percent had a 4 or 5-year College Program, and 26 or 0.6 percent left the question unanswered.

5. What Degree(s) Do You Hold In Nursing?

Of the 4,216 nurses returning the questionnaire, the greatest number, 3,403 or 80.7 percent had no degree in nursing; 75 or 1.8 percent held an Associate Degree; 402 or 9.5 percent had acquired a Baccalaureate Degree in Nursing; and 25 or 0.6 percent held a Master's Degree. This question was left unanswered by 311 or 7.4 percent of nurses.

6. What Degree(s) Do You Hold Other Than Nursing?

Of the 4,216 respondents to the question asking for a degree in other than Nursing 3,626 or 86.0 percent had no such degree; 111 or 2.7 percent had attained a Baccalaureate Degree in another field; 30 or 0.7 percent held a Master's Degree in other than Nursing; and one nurse responded to having a Doctorate Degree in another field. Those who did not respond to this question numbered 448 or 10.6 percent.

7. Primary And Secondary Reasons Why Not Employed.

The primary reasons why the respondents to this question were not employed as nurses follow in rank order of preference:

Reason	Number
1. Prefer to be home while children are young	2,044
2. Have not been in active practice for a while	397
3. Cannot make suitable arrangements for child care	363
4. Health does not permit return to nursing	268
5. Employers cannot utilize hours available	248
6. Salary not worthwhile	243

When listing their secondary reasons as to why they were not currently employed as a nurse, the following four reasons were cited most frequently:

Reason	Number
1. Have not been in active practice for a while	405
2. Salary not worthwhile	362
3. Cannot make suitable arrangements for child care	271
4. Prefer to be home while children are young	235

The following table shows primary and secondary reasons (number and percent) for not being employed as a nurse:

	Reasons Not Employed	Primary		Secondary	
		Number	Percent	Number	Percent
	Total Respondents	4,216	100.0	4,216	100.0
01.	Employment opportunities not available locally	41	1.0	24	0.6
02.	Employers cannot utilize hours I have available	248	5.9	164	3.9
03.	Cannot make arrangements for care of children	363	8.6	271	6.4
04.	Transportation difficult to arrange.	36	0.8	65	1.5
05.	Enrolled as student for further preparation	44	1.0	30	0.7
06.	Salary would not make it worthwhile	243	5.8	362	8.6
07.	Unable to secure domestic help	32	0.8	82	2.0
08.	Health does not permit return to nursing	268	6.4	41	1.0
09.	Have not been in active practice for a while	397	9.4	405	9.6
10.	Prefer volunteer community activities	62	1.5	84	2.0
11.	Prefer to be home while children are young	2,044	48.5	235	5.6
12.	No longer interested in nursing as occupation	74	1.7	39	0.9
13.	I am retired from nursing	*		*	
14.	Other	313	7.4	204	4.8
	Unanswered	51	1.2	2,210	52.4

*Those nurses who checked Box 13, "I am retired from Nursing" were excluded from all tabulations since their response further indicated no possibility of returning to active employment.

8. Do You Expect To Return To Work As A Nurse At Anytime In The Future?

Of the total respondents, 702 answered "definitely yes", and 1,799 said "probably yes". The following table shows the responses to this question:

Return To Work	Number	Percent
Total respondents	4,216	100.0
Definitely Yes	702	16.7
Probably Yes	1,799	42.7
Uncertain	1,102	26.1
Probably No	431	10.2
Definitely No	106	2.5
Unanswered	76	1.8

In regard to question 8, if the nurse checked boxes 3, 4 or 5, she was asked not to complete the remaining questions. This is indicated in the decrease in the number of respondents to the following questions.

9. How Many Children Under 18 At Home?

Most of the nurses who had children in this age category stated they had three children less than 18 years of age. The next largest group had two children in this age group. The following tabulation is of interest:

Children Under 18	Number	Percent
Total Respondents	2,501	100.0
None	119	4.8
One	246	9.8
Two	685	27.4
Three	722	28.9
Four	377	15.1
Five or More	314	12.5
Unanswered	38	1.5

10. Age of Youngest Child

Of the 2,370 nurses who replied to this question, 1687 stated their youngest child was Five years or less. Nurses whose youngest child was Six years or older numbered 683. Those who did not respond to the question numbered 131. Shown in the following tabulations are the ages of the youngest children according to the number and percent of nurses answering the items indicated.

Age of Youngest Child	Number	Percent
Total Respondents	2,501	100.0
Less than 1 year	385	15.4
1-5 years	1,302	52.1
6-10 years	461	18.4
11-15 years	152	6.1
Over 15	70	2.8
Unanswered	131	5.2

11. How Long Has It Been Since You Worked As A Nurse?

Of the 2,449 nurses who answered this question, 1,256 stated it was five years or less since they had worked as a nurse, and 1,193 had not worked in six or more years. There were 52 nurses who did not answer this question. The following tabulation shows the interval of time since the 2,449 nurses were employed:

Time Interval	Number	Percent
Total Respondents	2,501	100.0
Less than 1 year	391	15.6
1 year	99	4.0
2 years	213	8.5
3 years	142	5.7
4 years	177	7.1
5 years	234	9.4
6-10 years	752	30.1
11-15 years	283	11.3
16 plus years	158	6.3
Unanswered	52	2.1

12. How Soon Do You Intend To Return To Work?

Of the 1,712 nurses who checked the time in which they expect to return to work, 525 wish to return to nursing within one year or less. (This is the group whom we shall be contacting personally and/or in letter.) The following tabulations show the range, in years, of those nurses who indicated a desire to work in one year through five or more years:

Return to Work	Number	Percent
Total respondents	2,501	100.0
Less than 1 year	386	15.4
1 year	139	5.6
2 years	367	14.7
3 years	250	10.0
4 years	156	6.2
5 or more years	414	16.6
Unanswered	789	31.5

Although, in question 8, there were 2,501 nurses who indicated they expected to definitely "yes" or probably"yes" return to nursing, this question indicates 789 who are not certain as to the time of return to work.

13. When You Return, Will You Work Full-time, Part-time Or Uncertain?

Of the 2,501 nurses who are "definitely" or "probably" returning to work, 1,645 or 65.8 percent indicated they were interested in part-time employment, and only 176 or 7.0 percent wished to work full-time. At this moment, 661 or 26.4 percent were uncertain as to whether they would work full or part-time, and 19 or 0.8 percent did not respond to the question.

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14. Would You Like To Receive Information On Refresher Courses Planned For 1968?

More nurses requested information re: Refresher Courses than indicated they could attend. Those desiring information numbered 1,228 or 49.1 percent, but of these only 1010 or 40.4 percent could attend. The following table indicates interesting response to question 14, "would like information re: Refresher Courses," and question 15, "could attend Refresher Courses".

	(14) Would Like Information		(15) Could Attend	
Refresher Course	Number	Percent	Number	Percent
Total respondents	2,501	100.0	2,501	100.0
Yes	1,228	49.1	1,010	40.4
No	1,156	46.2	1,219	48.7
Uncertain	117	4.7	272	10.9

16. Which Of The Following Refresher Courses Would You Find Convenient To Attend?

Of those nurses who answered this question, 1,627 indicated those hours when most convenient to attend. On question 15, only 1,010 nurses indicated they could attend.

17. Which Of The Following Positions Would You Be Most Likely To Fill?

In response to this question, there was duplication since some nurses checked more than one box. The largest number, 1,681 indicated desire to fill the position of Staff Nurse. The following table indicates numbers of positions most likely to be filled:

Would Fill Positions	Number	Percent
Total respondents	2,687	100.0
Staff Nurse	1,681	62.6
Head Nurse	84	3.1
Supervisor	40	1.5
Instructor	127	4.7
Consultant	17	0.6
Uncertain	373	13.9
Other	366	13.6

18. Check ONE of the Following Fields In Which You Would Most Like To Work:

Of the 2,446 nurses who answered this question, the largest number, 1,334 said they would most like to work in a Hospital. There were 55 nurses who did not answer the question. The following tabulation shows all other fields in which the other respondents would wish to work:

Field Most Like To Work	Number	Percent
Total respondents	2,501	100.0 *
Hospital	1,334	53.3
Private Duty	56	2.2
Industrial	66	2.6
Public Health	115	4.6
School	281	11.2
Nursing Education	115	4.6
Doctor's Office	135	5.4
Nursing Home	48	1.9
Undecided	248	9.9
Other	48	1.9
Unanswered	55	2.2

* Percentage figures to 99.8 percent.

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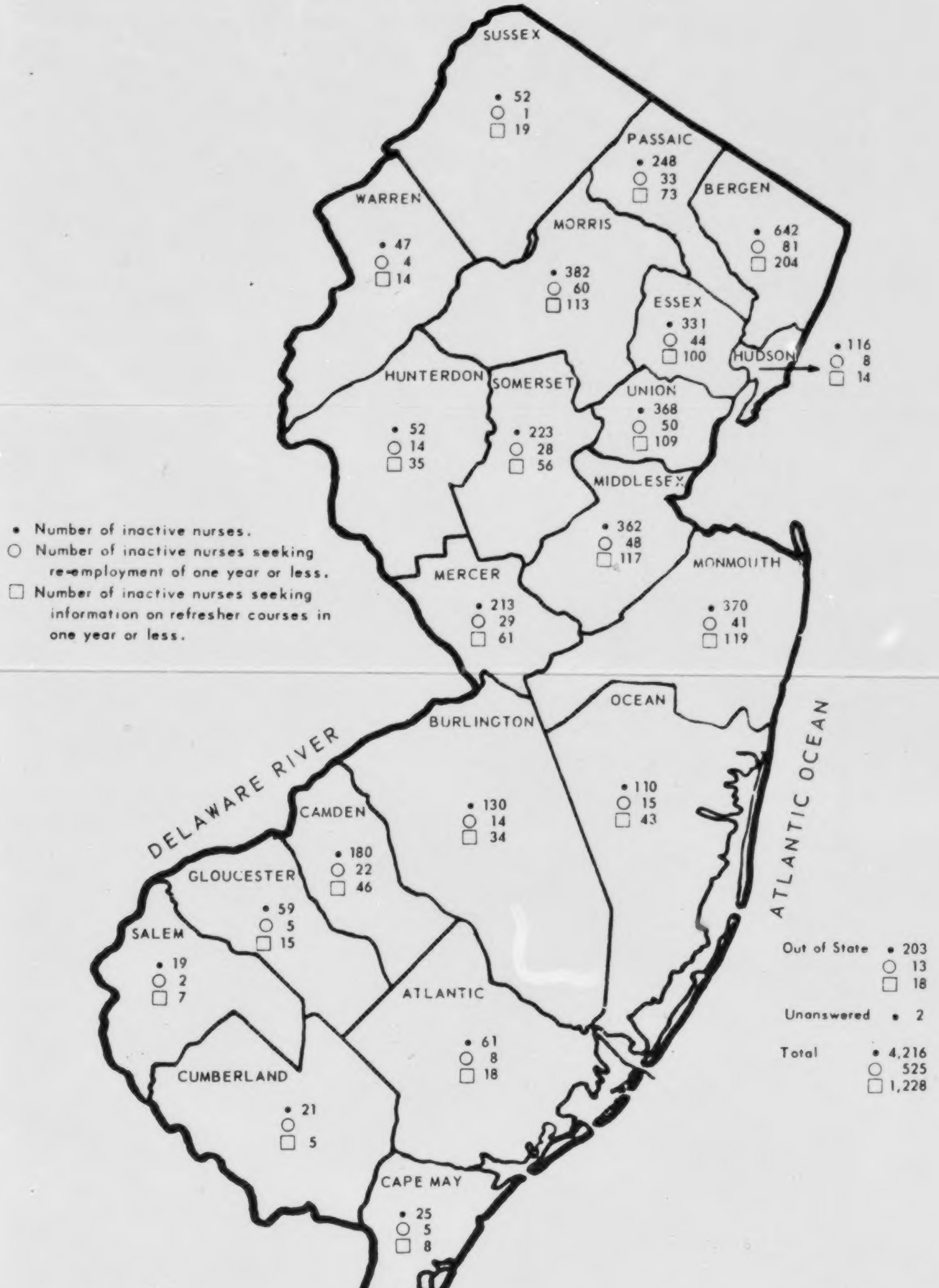
MAP 1 (APPENDIX-6)

INACTIVE NURSES, INACTIVE NURSES SEEKING RE-EMPLOYMENT OR INFORMATION ON REFRESHER COURSES WITHIN ONE YEAR OR LESS, BY COUNTY, NEW JERSEY, FEBRUARY 1968.


SUSSEX • 52 ○ 1 ☐ 19
PASSAIC • 248 ○ 33 ☐ 73
BERGEN • 642 ○ 81 ☐ 204
WARREN • 47 ○ 4 ☐ 14
MORRIS • 382 ○ 60 ☐ 113
ESSEX • 331 ○ 44 ☐ 100
HUDSON • 116 ○ 8 ☐ 14
HUNTERDON • 52 ○ 14 ☐ 35
SOMERSET • 223 ○ 28 ☐ 56
UNION • 368 ○ 50 ☐ 109
MIDDLESEX • 362 ○ 48 ☐ 117
MERCER • 213 ○ 29 ☐ 61
MONMOUTH • 370 ○ 41 ☐ 119
OCEAN • 110 ○ 15 ☐ 43
BURLINGTON • 130 ○ 14 ☐ 34
CAMDEN • 180 ○ 22 ☐ 46
GLOUCESTER • 59 ○ 5 ☐ 15
SALEM • 19 ○ 2 ☐ 7
ATLANTIC • 61 ○ 8 ☐ 18
CUMBERLAND • 21 ○ ☐ 5
CAPE MAY • 25 ○ 5 ☐ 8
DELAWARE RIVER
ATLANTIC OCEAN
• Number of inactive nurses.
○ Number of inactive nurses seeking re-employment of one year or less.
☐ Number of inactive nurses seeking information on refresher courses in one year or less.
Out of State • 203 ○ 13 ☐ 18
Unanswered • 2
Total • 4,216 ○ 525 ☐ 1,228

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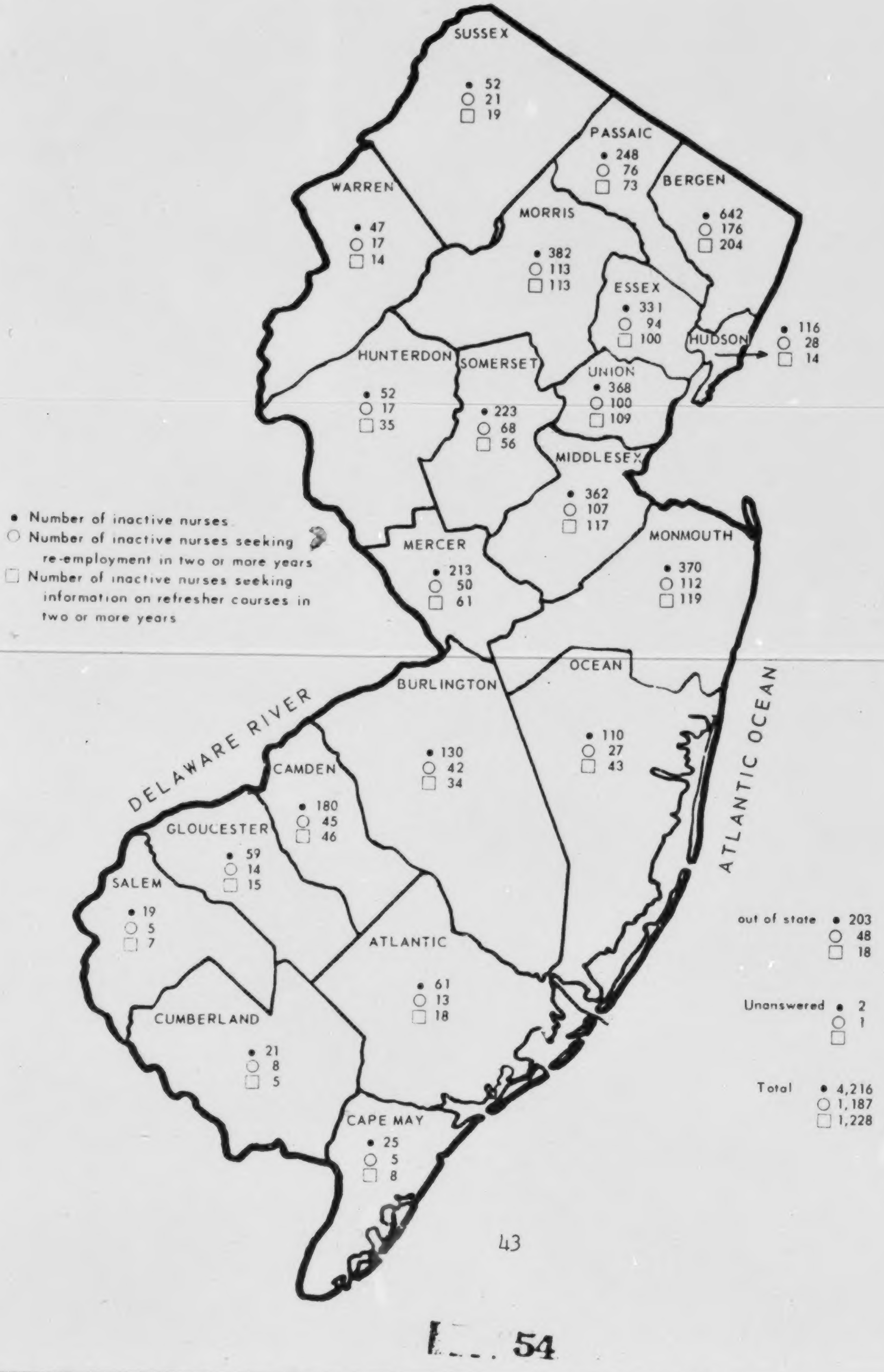
MAP 2 (APPENDIX-7)

INACTIVE NURSES, INACTIVE NURSES SEEKING RE-EMPLOYMENT OR INFORMATION ON REFRESHER COURSES IN TWO OR MORE YEARS, BY COUNTY, NEW JERSEY, FEBRUARY 1968.


SUSSEX
● 52
○ 21
☐ 19
PASSAIC
● 248
○ 76
☐ 73
BERGEN
● 642
○ 176
☐ 204
WARREN
● 47
○ 17
☐ 14
MORRIS
● 382
○ 113
☐ 113
ESSEX
● 331
○ 94
☐ 100
HUDSON
● 116
○ 28
☐ 14
HUNTERDON
● 52
○ 17
☐ 35
SOMERSET
● 223
○ 68
☐ 56
UNION
● 368
○ 100
☐ 109
MIDDLESEX
● 362
○ 107
☐ 117
MERCER
● 213
○ 50
☐ 61
MONMOUTH
● 370
○ 112
☐ 119
OCEAN
● 110
○ 27
☐ 43
BURLINGTON
● 130
○ 42
☐ 34
CAMDEN
● 180
○ 45
☐ 46
GLOUCESTER
● 59
○ 14
☐ 15
SALEM
● 19
○ 5
☐ 7
ATLANTIC
● 61
○ 13
☐ 18
CUMBERLAND
● 21
○ 8
☐ 5
CAPE MAY
● 25
○ 5
☐ 8
DELAWARE RIVER
ATLANTIC OCEAN
● Number of inactive nurses
○ Number of inactive nurses seeking re-employment in two or more years
☐ Number of inactive nurses seeking information on refresher courses in two or more years
out of state ● 203 ○ 48 ☐ 18
Unanswered ● 2 ○ 1 ☐
Total ● 4,216 ○ 1,187 ☐ 1,228

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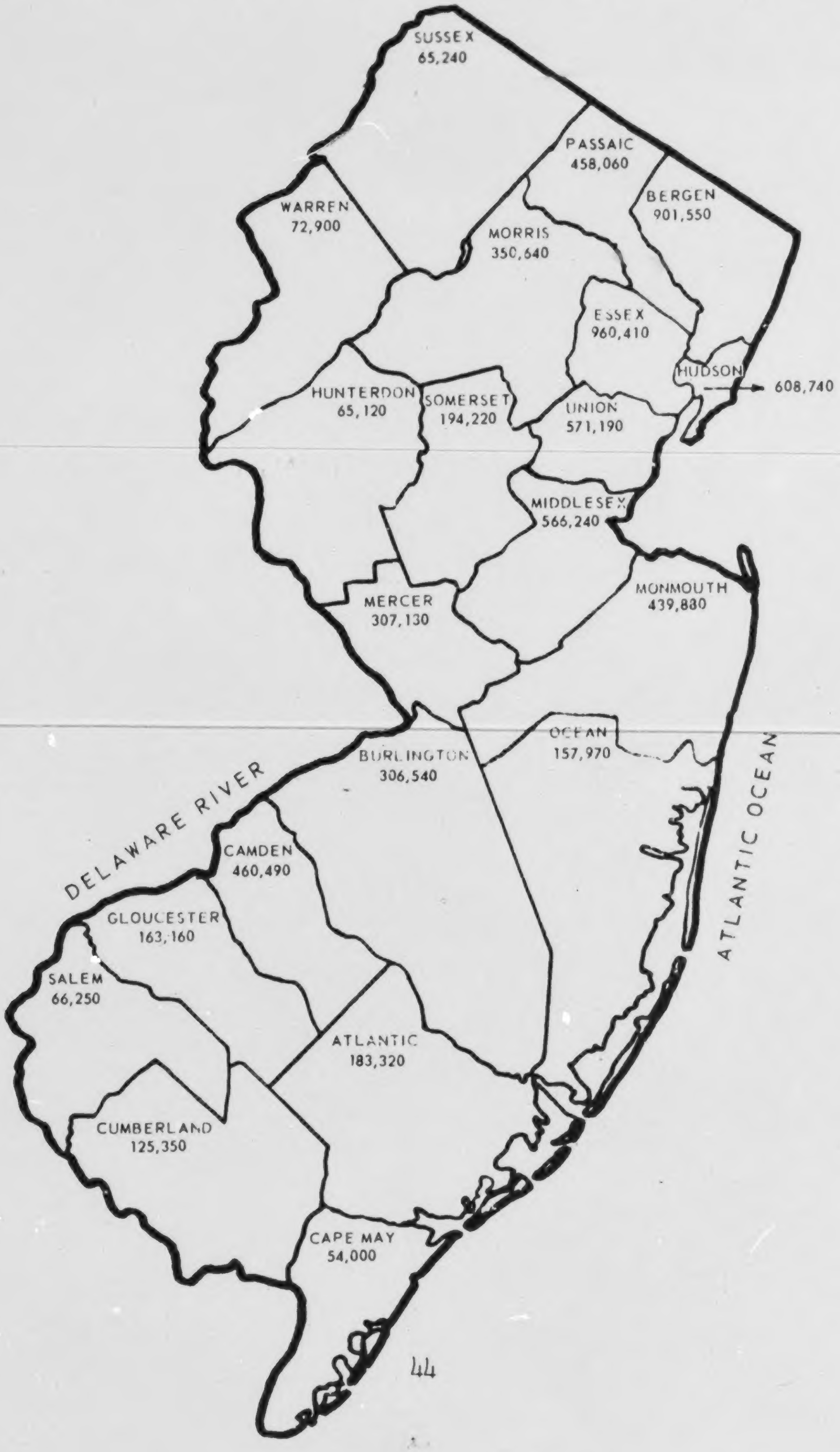
POPULATION IN EACH OF THE 21 COUNTIES IN NEW JERSEY AS OF JULY 1, 1967 ESTIMATES. TOTAL POPULATION, 7,078,400.

MAP 3 (APPENDIX-8)


SUSSEX
65,240
PASSAIC
458,060
BERGEN
901,550
WARREN
72,900
MORRIS
350,640
ESSEX
960,410
HUDSON
608,740
HUNTERDON
65,120
SOMERSET
194,220
UNION
571,190
MIDDLESEX
566,240
MONMOUTH
439,880
MERCER
307,130
OCEAN
157,970
BURLINGTON
306,540
DELAWARE RIVER
ATLANTIC OCEAN
CAMDEN
460,490
GLOUCESTER
163,160
SALEM
66,250
ATLANTIC
183,320
CUMBERLAND
125,350
CAPE MAY
54,000

APPENDIX- 9 -A

Table 1: Number and percent of inactive registered nurses contacted in New Jersey according to age and intention to return to active nursing practice

Age (years)	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	4216	100.0	2501	59.3	537	12.7	1178	28.0
Under 20	0	100.0	0	0	0	0	0	0
20-29	562	100.0	466	82.9	20	3.6	76	13.5
30-39	1756	100.0	1259	71.7	113	6.4	384	21.9
40-49	1030	100.0	547	53.1	112	10.9	371	36.0
50-59	476	100.0	109	22.9	160	33.6	207	43.5
60 or over	156	100.0	19	12.2	80	51.3	57	36.5
No response	236	100.0	101	42.8	52	22.0	83	35.2

APPENDIX- 9 -B

Table 2: Number and percent of inactive registered nurses contacted in New Jersey according to marital status and intention to return to active nursing practice

Marital status	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	4216	100.0	2501	59.3	537	12.7	1178	28.0
Single	48	100.0	17	35.4	15	31.3	16	33.3
Married	4021	100.0	2422	60.2	489	12.2	1110	27.6
Divorced,	17	100.0	11	64.7	0	0	6	35.3
widowed	90	100.0	29	32.2	28	31.1	33	36.7
separated	17	100.0	11	64.7	1	5.9	5	29.4
No responce	23	100.0	11	47.8	4	17.4	8	34.8

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APPENDIX-9-C

Table 3: Number and percent of inactive registered nurses contacted in New Jersey according to number of children and intention to return to active nursing practice

Number of children	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	2501	100.0	2501	100.0	N/A	N/A	N/A	N/A
None	119	100.0	119	100.0				
One	246	100.0	246	100.0				
Two	685	100.0	685	100.0				
Three	722	100.0	722	100.0				
Four	377	100.0	377	100.0				
Five or more	314	100.0	314	100.0				
No response	38	100.0	38	100.0				

Footnote: N/A indicates not available.

APPENDIX-9-D

Table 4: Number and percent of inactive registered nurses contacted in New Jersey according to type of basic nursing education program and intention to return to active nursing practice

Type of basic nursing education program	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	4216	100.0	2501	59.3	537	12.7	1178	28.0
Junior College	56	100.0	43	78.2	8	14.5	4	7.3
Hospital	3832	100.0	2250	58.7	495	12.9	1087	28.4
College	302	100.0	207	68.3	26	8.6	70	23.1
No response	26	100.0	1	3.8	8	30.8	17	65.4

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APPENDIX-9-E

Table 5: Number and percent of inactive registered nurses contacted in New Jersey according to highest academic degree held and intention to return to active nursing practice

5 A. DEGREES IN NURSING

Academic degree	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	4216	100.0	2501	59.3	537	12.7	1178	28.0
Associate	75	100.0	55	73.3	5	6.7	15	20.0
Bachelor's	402	100.0	267	66.4	44	11.0	91	22.6
Master's	25	100.0	22	88.0	1	4.0	2	8.0
Degree not specified	311	100.0	112	36.0	81	26.0	118	38.0
No academic degree	3403	100.0	2045	60.0	406	12.0	952	28.0

5 B. DEGREES OTHER THAN NURSING

Academic degree	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	4216	100.0	2501	59.3	537	12.7	1178	28.0
Bachelor's	111	100.0	71	64.0	15	13.5	25	22.5
Master's	30	100.0	13	43.3	10	33.3	7	23.3
Doctorate	1	100.0	0	0	1	100.0	0	0
Degree not specified	448	100.0	201	44.9	94	21.0	153	34.1
No academic degree	3626	100.0	2216	61.1	417	11.5	993	27.4

APPENDIX-9-F

Table 6: Number and percent of inactive registered nurses contacted in ______________ according to year of graduation from basic nursing education program and intention to return to active nursing practice

Year of graduation	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total		100.0						
Prior to 1920		100.0						
1920-1929		100.0						
1930-1939		100.0						
1940-1949		100.0		N				
1950-1959		100.0			A			
1960 or later		100.0						
No response		100.0						

Footnote: N/A indicates not available.

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APPENDIX- 9 -G

Table 7: Number and percent of inactive registered nurses contacted in New Jersey according to last reported field of practice and intention to return to active nursing practice

Field of practice	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	2501	100.0	2501	100.0				
Hospitals and related institutions	817	100.0	817	100.0				
Nursing homes	43	100.0	43	100.0				
Public health	188	100.0	188	100.0				
School nurse	33	100.0	33	100.0		N	A	
Nursing education	107	100.0	107	100.0				
Occupational health	0	100.0	0	0				
Private duty	443	100.0	443	100.0				
Office nurse & others	845	100.0	845	100.0				
No response	25	100.0	25	100.0				

Footnote: N/A indicates not available.

APPENDIX-9 -H

Table 8: Number and percent of inactive registered nurses contacted in New Jersey according to primary reason for being inactive and intention to return to active nursing practice

Primary reason for being inactive	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	4216	100.0	2501	59.3	537	12.7	1178	28.0
I believe a mother should be in the home while her children are young.	2044	100.0	1364	66.7	137	6.7	543	26.6
I cannot make suitable arrangement for the care of my child or children.	363	100.0	307	84.6	7	1.9	49	13.5
My husband prefers that I do not work.	0	0	0	0	0	0	0	0
The salary I would get would not make it worthwhile.	243	100.0	127	52.3	25	10.3	91	37.4
Other.	313	100.0	156	49.8	61	19.5	96	30.7
I am reluctant to return because I have not engaged in nursing practice for a while.	397	100.0	183	46.1	62	15.6	152	38.3
Employers cannot utilize the working hours I could be available.	248	100.0	195	78.6	8	3.2	45	18.2
I prefer to be a homemaker.	0	0	0	0	0	0	0	0
I am not able to engage in active nursing practice because of my health.	268	100.0	38	14.2	126	47.0	104	38.8
Employment opportunities in my field of practice are not available.	41	100.0	28	68.3	1	2.4	12	29.3
No reason.	0	0	0	0	0	0	0	0
The lack of domestic help for household tasks prevents me from being active in nursing.	32	100.0	23	71.9	1	3.1	8	25.0
I am enrolled as a full-time student obtaining further preparation in nursing.	44	100.0	38	86.4	1	2.3	5	11.3
I have transportation difficulties.	36	100.0	18	50.0	1	2.8	17	47.2
I prefer to give my available time as a volunteer worker in community activities.	62	100.0	7	11.3	36	58.1	19	30.6
I am not at present interested in nursing as an occupation.	74	100.0	2	2.7	60	81.1	12	16.2
No response	51	100.0	15	29.4	11	21.6	25	49.0

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APPENDIX- 9-I

Table 9: Number and percent of inactive registered nurses contacted in ____________ according to number of years worked full-time and intention to return to active nursing practice

Number of years worked full-time	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total		100.0						
Never		100.0						
One but less than three		100.0						
Three but less than five		100.0			N	A		
Five but less than ten		100.0						
Ten or more		100.0						
No response		100.0						

Footnote: N/A indicates not available.

APPENDIX- 9-J

Table 10: Number and percent of inactive registered nurses contacted in ____________ according to number of years worked part-time and intention to return to active nursing practice

Number of years worked part-time	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total		100.0						
Never		100.0						
One but less than three		100.0						
Three but less than five		100.0			N			
Five but less than ten		100.0				A		
Ten or more		100.0						
No response		100.0						

Footnote: N/A indicates not available.

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APPENDIX- 9 -K

Table 11: Number and percent of inactive registered nurses contacted in New Jersey according to number of years inactive and intention to return to active nursing practice

Number of years inactive	Total nurses		Intention					
			To return		Not to return		Undecided or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	2501	100.0	2501	100.0				
Less than one	391	100.0	391	100.0				
One but less than three	312	100.0	312	100.0		N	A	
Three but less than five	319	100.0	319	100.0				
Five but less than 10	841	100.0	841	100.0				
Ten or more	586	100.0	586	100.0				
No response	52	100.0	52	100.0				

Footnote: N/A indicates not available.

APPENDIX- 9 -L

Table 12: Number and percent of inactive registered nurses contacted in New Jersey who plan to return to work according to when they expect to return and their intention to return on a full- or part-time basis

When expect to return (years)	Total nurses		Intended basis of employment					
			Full-time		Part-time		Uncertain or no response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	2501	100.0	176	7.0	1645	65.8	680	27.2
Less than one	386	100.0	37	9.6	297	76.9	52	13.5
One but less than two	139	100.0	14	10.1	103	74.1	22	15.8
Two but less than three	367	100.0	28	7.6	274	74.7	65	17.7
Three but less than five	406	100.0	28	6.9	269	66.3	109	26.8
Five or more	414	100.0	24	5.8	259	62.6	131	31.6
Undecided)	789	100.0)	45	5.7	443	56.2	301	38.1
No response)		100.0)						

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APPENDIX- 9 -M

Table 13: Number of inactive registered nurses contacted in New Jersey who plan to return to work according to field of practice most likely to return to and last reported field of practice

Field most likely to return to	Total nurses	Last reported field of practice								
		Hospitals & related institutions	Nursing homes	Public health	School nurse	Nursing education	Occupational health	Private duty	Office nurse & others	No response
Total	2501	817	43	188	33	107	0	443	845	25
Hospitals and related institutions	1337	565	27	62	7	40	0	244	383	9
Nursing homes	48	6	5	7	0	1	0	14	14	1
Public health	115	11	1	40	0	7	0	12	44	0
School nurse	281	66	1	36	15	10	0	49	101	3
Nursing education	115	17	1	11	5	34	0	14	32	1
Occupational health	0	0	0	0	0	0	0	0	0	0
Private duty	56	4	0	2	1	2	0	28	19	0
Office nurse & others	497	138	6	27	4	13	0	71	236	2
No response	52	10	2	3	1	0	0	11	16	9

APPENDIX- 9 -N

Table 14: Number and percent of inactive registered nurses contacted in New Jersey who plan to return to work according to number of years inactive and their desire for a refresher course

Number of years inactive	Total nurses		Desire a refresher course					
			Yes		No		No response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	2501	100.0	1228	49.1	1156	46.2	117	4.7
Less than one	391	100.0	147	37.6	221	56.5	23	5.9
One but less than three	312	100.0	132	42.3	165	52.9	15	4.8
Three but less than five	319	100.0	146	45.8	164	51.4	9	2.8
Five but less than ten	841	100.0	399	47.5	403	47.9	39	4.6
Ten or more	586	100.0	375	64.0	191	32.6	20	3.4
No response	52	100.0	29	55.8	12	23.1	11	21.1

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APPENDIX- 9 -O

*Information supplied by Mrs. Mineva A. Mayberry, R.N., Coordinator, Nurse Refresher Program.

Table 15: Number and percent of inactive registered nurses contacted in New Jersey who planned to return to work according to their desire for a refresher course and subsequent enrollment in, and completion of a refresher course

Desire for a refresher course	Total nurses		* Enrolled in a refresher course Between July 1967 & July 1968						Did not enroll		Unknown	
			Total		Completed course		Did not complete course					
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	2501	100.0										
Yes	1228	100.0	226	100	206	91	20	9	--	--	--	--
No	1156	100.0										
No response	117	100.0										
Contacted between July 1967 & July 1968	*185	100.0	226	100	206	91	20	9	--	--	--	--

Footnote: *These figures reflect Total Enrollment during the stated period and are not necessarily related to the 185 nurses contacted.

*The 185 inactive nurses were contacted (1) through use of a Master List which included those persons who indicated an interest in a refresher course, and (2) as a result of individual telephone or letter inquiry.

* This number does not reflect nurses entering courses as a result of learning about the Program via various communications media.

APPENDIX- 9 -P

Information supplied by Mrs. Mineva A. Mayberry, R.N., Coordinator, Nurse Refresher Program.

Table 16: Number and percent of inactive registered nurses contacted in New Jersey between 1965 & 1967 who completed a refresher course according to employment status 6-24 months following completion of course

Employment status	Number of nurses	Percent of nurses
Total	(See Footnote)	100.0
Employed in nursing		
Full-time		
Part-time		
Not employed in nursing		
Unknown		

Footnote:

814 nurses completed Nurse Refresher Program - June 1965 through June 1967
1 deceased
813 questionnaires mailed
1 returned (deceased)
812
454 returned as of 3/5/68
The employment data for the 454 respondents to the questionnaire is as follows:

299 Nurses Employed in Nursing (65.9%)
61 Employed Full-time (20.4%)
238 Employed Part-time (79.6%)
299
155 Not Employed in Nursing (34.1%)
454

The information above shows only the preliminary questionnaire results.

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APPENDIX- 9 -Q

Table 17: Number and percent of inactive registered nurses contacted in New Jersey who returned to work according to field of employment and employment status

Field of employment	Total nurses		Employment status			
			Full-time		Part-time	
	Number	Percent	Number	Percent	Number	Percent
Total		100.0		100.0		100.0
Hospitals and related institutions						
Nursing homes						
Public health						
School nurse						
Nursing education						
Occupational health						
Private duty						
Office nurse and others						
Unknown						

Footnote: At this moment it is not feasible to ascertain the number of nurses contacted in New Jersey who have returned to work according to field of employment and employment status. We do know, through personal and written contact, some have returned to employment. With the extension of the contract through October 31, 1968, we should be able to determine this.

APPENDIX- 9 -R

Information supplied by Mrs. Mineva A. Mayberry, R.N., Coordinator, Nurse Refresher Program.

Table 18: Number of refresher courses provided from September 1965 (month, year) to June 1968 (month, year), number of students enrolled, and number of students completing course by source of financial support

Source of financial support	Number of courses	Number of students enrolled	Number of students completing course
Total			
MDTA	90	1108	1020
Other government funds			
Privately sponsored no tuition			
Privately sponsored tuition charged			

APPENDIX- 9 -S

Information supplied by Mrs. Mineva A. Mayberry, R.N., Coordinator, Nurse Refresher Program.

Table 19: Number of refresher courses provided from July 1965 (month, year) to July 1968 (month, year), number of students enrolled, and number of students completing course by type of institution providing course

Type of institution	Number of courses	Number of students enrolled	Number of students completing course
Total			
Hospital	90	1108	1020
Vocational School			
Junior College			
University			
Other (specify)			

APPENDIX-10

NEW JERSEY STATE NURSES' ASSOCIATION

MRS. SARA M. ERRICKSON, R.N., EXECUTIVE DIRECTOR
ROOM 201 • 60 SOUTH FULLERTON AVENUE • MONTCLAIR, N. J. 07042
TELEPHONE 783-9292

February 29, 1968

Mrs. Geraldine R.S. Schiavone, R.N.
Project Nurse Coordinator
N.J. State Department of Health
John Fitch Plaza
P.O. Box 1540
Trenton, N.J. 08625

Dear Mrs. Schiavone:

This will confirm a request which was made by Miss Margaret Maskrey, at last month's regular Board of Directors meeting. There were several members of the Board interested in Miss Maskrey's request which had to do with the results of your R.N. Survey.

The SNA's genuine interest is in having a composite report to work out a plan through communications which would bring to these nurses necessary information on nursing and interest them in the work of the organization which would ultimately bring them together with current information about nursing and nursing practice.

It would also assist if we had a full scale Counselling Service in having these nurses benefit through appropriate programs which would improve patient care. There are many other ways that this information could be utilized for the benefit of nursing service by our institutions and agencies.

Sincerely yours,

Sara M Errickson R.N.

SME:ss

(Mrs.) Sara M. Errickson, R.N.
Executive Director

APPENDIX-11

ROSCOE P. KANDLE, M.D., M.P.H.
State Commissioner of Health

OFFICE OF THE COMMISSIONER

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

July 1968

Dear

Sincere thanks for your response to the questionnaire mailed in November to the inactive, licensed, professional nurses in New Jersey. Evaluation of your response has made it possible for me to determine how best I can assist you.

In order to make maximum use of the data collected from the questionnaires, meetings are being held in the State for the purpose of offering assistance to those nurses seeking employment within three years, and/or other counsel. Such a meeting is being held in your area at:

____

____

May I ask you to please complete the bottom tear-off portion of this letterhead and return it to me with your Signature, Address, and Telephone number. Please indicate if you plan to bring another nurse who seeks guidance. Inactive nurses are welcome.

It will be my pleasure to meet with you.

Sincerely,
Geraldine R.S. Schiavone
(Mrs) Geraldine R. S. Schiavone, R.N., M.A.
Project Nurse Coordinator

- -

1. I will attend the meeting ☐
2. I am unable to attend the meeting ☐

SIGNATURE ______________________________

ADDRESS ______________________________

TELEPHONE NUMBER ______________________________

APPENDIX-12

SURVEY OF NURSES ATTENDING AUGUST 21 THROUGH OCTOBER 24, 1968 MEETINGS

February 1969

Hello:

I met with you late last year in an effort to give assistance where requested. It was a pleasant experience for me, and personal contact with many of you since our talk together indicates you were helped. This project has been extended through November 1969, and you would supply valuable assistance by responding to the questions asked on the duplicate card and mailing it to me as soon as possible. Your name has been placed on the mailing list of the New Jersey State Department of Health monthly bulletin, Public Health News, and we have mailed you the October 1968 issue which carries an article about the Inactive Health Personnel Project. Please feel free to write or call me (609-292-5764) if I can assist you in any way. We so appreciate your response. Thank you.

Sincerely,

Project Nurse Coordinator

February 1969

I am now employed in nursing. Yes ☐ No ☐

I am employed full-time ☐ part-time ☐

I have taken a nurse refresher course. Yes ☐ No ☐
If yes, month ____________ year __________.

I feel the meeting I attended worthwhile. Yes ☐ No ☐

I would like to attend another meeting. Yes ☐ No ☐

Name ____

Address ____

Telephone ____

County ______________________ Zip Code ________________

APPENDIX-13

ROSCOE P. KANDLE, M.D., M.P.H.
State Commissioner of Health

OFFICE OF THE COMMISSIONER

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

April, 1969

Dear Professional Nurse:

Sincere thanks for your response to the questionnaire mailed in November 1967 to the inactive licensed professional nurses in New Jersey. Evaluation of your response has made it possible for us to determine how best we can assist you.

Analysis of the data collected from the questionnaire prompted us to hold 12 meetings for inactive nurses in various parts of the State. The response from the nurses who attended indicates that they received assistance and stimulation from these meetings. As a matter of fact, many nurses who attended are now actively employed in nursing.

Since many did profit from this experience, we are again conducting regional meetings in the State for the purpose of offering assistance to those seeking employment within five years and/or other counsel. Such a meeting is being held in your area at:

May we ask you to please complete the bottom tear-off portion of this letterhead and return it to us with your Signature, Address and Telephone Number in the prepaid enclosed envelope. Please indicate if you plan to bring another nurse who seeks guidance. Inactive nurses are welcome. It will be our pleasure to meet with you.

Sincerely,

Geraldine R. S. Schiavone

(Mrs.) Geraldine R. S. Schiavone, R.N., M.A.
Project Nurse Coordinator

PLEASE DETACH & RETURN AT ONCE

1. I will attend the meeting. Yes ☐ No ☐
2. If unable to attend please indicate why. Time of meeting ☐ Family Commitment ☐ Transportation ☐ Other ☐ ____________________
3. If employed, please complete. Nursing ☐ Other ☐ Full-time ☐ Part-time ☐
4. I have taken a nurse refresher course. Yes ☐ Year ________ No ☐

SIGNATURE ____________________

ADDRESS ____________________

TELEPHONE NUMBER ____________________

APPENDIX-14

SURVEY OF NURSES ATTENDING MAY AND JUNE 1969 REGIONAL MEETINGS

September 1969

Hello:

I met with you early in the summer in an effort to give assistance where requested. It was a pleasant experience for me and personal contact with many of you since our talk together indicated you were helped. This project has been extended through November 1969 and you would supply valuable assistance to it by responding to the questions asked on the attached duplicate card. Please respond by return mail since we are making much use of the statistics. At your request, your name has been placed on the mailing list of the New Jersey State Department of Health monthly bulletin, PUBLIC HEALTH NEWS. Please feel free to write or call me (609-292-5764) if we can assist you in any way. We appreciate your response. Thank you.

Sincerely,

Project Nurse Coordinator

September 1969

I am now employed in nursing. Yes ☐ No ☐

I am employed full time ☐ part-time ☐

I have taken a nurse refresher course. Yes ☐ No ☐
If yes, month ____________ year ________.

I feel the meeting I attended worthwhile. Yes ☐ No ☐

I would like to attend another meeting. Yes ☐ No ☐

Name ____

Address ____

Zip ______________ County ________________ Phone __________

APPENDIX-15

ROSCOE P. KANDLE, M.D., M.P.H.
STATE COMMISSIONER OF HEALTH

CURTIS F. CULP, M.D.
ASSISTANT COMMISSIONER FOR HEALTH FACILITIES

State of New Jersey

DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, N. J. 08625

July 7, 1969

Mrs. Dorothy C. Lemmon
Owner and Administrator
The Washington Nursing Home
Box 45 - R. D. 4
West Washington Avenue
Washington, New Jersey 07882

Dear Mrs. Lemmon:

I am in receipt of your letter dated July 3, 1969 and am happy to enclose the fold-out sheets of licensed professional nurses residing in Warren County. These are the nurses who, according to our questionnaire mailed to them in November 1967, indicated their desire to return to active employment.

If you are successful in employing a nurse or nurses from this list, please let us know at once. If any of the nurses tell you they are employed on a full or part-time basis, please send us their names so that we can remove those names from the inactive list.

We also request that you return the fold-out sheet to us as soon as you have it copied. This is essential to our project since we are supplying the names and addresses on the list to other health facilities in Warren County.

You may also wish to contact the New Jersey Licensed Practical Nurse Association. Their address is: 99-101 Lincoln Park, Newark, New Jersey and telephone number: 201-642-1309.

We wish you success in your recruitment.

Sincerely,

Geraldine R. S. Schiavone

(Mrs.) Geraldine R. S. Schiavone, R.N.,M.A.
Project Nurse Coordinator

GRSS/jc
Enc.

APPENDIX-16

INACTIVE HEALTH PERSONNEL PROJECT

PLUS NUMBER OF NURSES ACTIVE IN 1968 OVER 1966

Atlantic	113
Bergen	457
Burlington	97
Cape May	22
Camden	196
Cumberland	8
Essex	800
Gloucester	75
Hudson	176
Hunterdon	30
Mercer	243
Middlesex	271
Monmouth	420
Morris	210
Ocean	105
Passaic	191
Salem	13
Somerset	29
Sussex	34
Union	294
Warren	10
TOTAL	3794

APPENDIX-17

ROSCOE P. KANDLE, M.D., M.P.H.
State Commissioner of Health

OFFICE OF THE COMMISSIONER

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

Dear Professional Nurse:

In November of 1967, we mailed a questionnaire to the licensed, inactive professional nurses in New Jersey. The purpose of the mailing was to obtain information which would assist us in implementing the return of many inactive nurses to active employment. We were very pleased that more than 7,000 nurses responded to our questionnaire. It was particularly gratifying that more than 2,000 nurses indicated a desire to return to nursing and you were one of that number.

The information obtained from the returned questionnaires has given us insight into the concerns of the inactive nurses and has guided us as we proceed to locate and assist nurses who desire to return to active employment. We have helped to increase the supply of professional nurses by identifying blocks and barriers to employment, by offering recommendations for their solution and by giving assistance to a number of nurses in securing positions which would utilize their skills and abilities. One way this was accomplished was by conducting 18 regional meetings embracing the 21 counties in New Jersey.

Since the overall objective of this contract between the United States Department of Health, Education and Welfare, Public Health Service, and the New Jersey State Department of Health is to increase the supply of health manpower in the State of New Jersey, we must consistently evaluate the progress of this Inactive Health Personnel Project.

We are now attempting to evaluate how many nurses who expressed an interest in returning to work have done so, and factors which motivated their return to their profession. As a professional person, who shares our concern in the nursing shortage in New Jersey, we look to you for assistance which is vital to the continued progress of this project.

Please answer the questions on the enclosed card and return it to us as soon as possible in the envelope provided.

Thank you.

Sincerely,

Johanna E. Kennedy
(Mrs.) Johanna E. Kennedy, R.N., M.A.
Project Director, and Chief, Nursing Program

Geraldine R. S. Schiavone
(Mrs.) Geraldine R. S. Schiavone, R.N., M.A.
Project Nurse Coordinator

APPENDIX-18

APRIL 1969 SURVEY OF PROFESSIONAL NURSES DEFINITELY OR PROBABLY PLANNING TO RETURN TO ACTIVE EMPLOYMENT IN THE FUTURE

New Jersey State Department of Health

INACTIVE HEALTH PERSONNEL PROJECT - NURSE MANPOWER

I am now employed in nursing. Yes ☐ No ☐ Full Time ☐ Part Time ☐

Health facility where I am employed ____________________

In what department and position are you employed ____________________

My working hours are (shift) ____________________

I have been employed since ____________________

I have taken a nurse refresher course. Yes ☐ Year __________ No ☐

I would like to take a nurse refresher course Yes ☐ No ☐ Daytime ☐ Evening ☐

If I took a nurse refresher course I would return to active employment. Yes ☐ No ☐
Full-time ☐ Part-time ☐

If you have returned to nursing, what factors influenced your decision

Comments will be appreciated.

Name ____________________

Address ____________________

Phone __________ County __________ __________ Zip __________

M6383

APPENDIX-19

TABLE 1. EMPLOYMENT STATUS AND PLACE OF EMPLOYMENT OF 408 NURSES BY COUNTY OF RESIDENCE

NEW JERSEY SURVEY, APRIL 1969

County of Residence	Nurses Employed				Place of Employment								
	Number	Full Time	Part Time	Not Stated	Hospital	Nursing Home	School	Public Health	Industry	Doctor's Office	Nursing Education Facility	Private Duty	Other
Total	408	66	335	7	208	53	59	10	6	27	4	20	21
Atlantic	7	1	6		6					1			
Bergen	57	6	50	1	33	2	9			3	1	2	7
Burlington	15	1	13	1	6	4	1		1	2		1	
Camden	17	1	16		10	2			1	1		2	1
Cape May	3	1	2		1		2						
Cumberland	2		2		1		1						
Essex	33	6	27		18	3	4	4	1	1		1	1
Gloucester	6		6		3		1			1	1		
Hudson	12	4	8		6	1	2			1			2
Hunterdon	4	2	2		4								
Mercer	16	2	14		5	2	4			1		2	2
Middlesex	35	6	29		17	5	6		2	1		4	
Monmouth	39	8	30	1	16	7	4	1	1	4		3	4
Morris	40	5	34	1	20	6	6	1		2		2	
Ocean	8	3	5		2	2	3			1			2
Passaic	40	6	32	2	21	8	5	2		2	1		1
Salem	3	1	2		2					1			
Somerset	17	1	16		4	3	3	1		3	1	1	1
Sussex	7	4	3		5	1				1			
Union	37	3	33	1	19	6	8	1		1		2	
Warren	5	2	3		4	1							
Out-of-State	5	3	2		5								

APPENDIX-20

TABLE 2. NURSE REFRESHER COURSES COMPLETED OR DESIRED AND PREFERRED TIME FOR SCHEDULING FUTURE COURSES BY COUNTY OF RESIDENCE OF NURSES SURVEYED

NEW JERSEY SURVEY, APRIL 1969

County of Residence	Nurses Employed	Completed Course	Nurses Interested in Future Course			
			Number	Preferred Time		
				Day-time	Evening	Not Stated
Total	408	57	100	24	62	14
Atlantic	7	1	2		1	1
Bergen	57	10	9	2	7	
Burlington	15		4	1	1	2
Camden	17	5	5	3	1	1
Cape May	3					
Cumberland	2		2	2		
Essex	33	7	6	2	3	1
Gloucester	6	2				
Hudson	12		4	1	2	1
Hunterdon	4					
Mercer	16	2	5	1	4	
Middlesex	35	2	11	2	7	2
Monmouth	39	10	8	1	4	3
Morris	40	2	14		14	
Ocean	8		3	1	2	
Passaic	40	6	7	1	5	1
Salem	3	2	1			1
Somerset	17	3	5	1	4	
Sussex	7		2	1	1	
Union	37	4	8	4	3	1
Warren	5		2	1	1	
Out-of-State	5	1	2		2	

APPENDIX-21

TABLE 3. NURSES INDICATING INTEREST IN TAKING A NURSE REFRESHER COURSE AND INTENT TO RETURN TO WORK FULL OR PART TIME BY COUNTY OF RESIDENCE

NEW JERSEY SURVEY, APRIL 1969

County of Residence	Number	Intent to Work		
		Full-time	Part-time	Not Stated
Total	100	2	53	45
Atlantic	2			2
Bergen	9		5	4
Burlington	4	1	2	1
Camden	5		4	1
Cape May				
Cumberland	2			2
Essex	6		4	2
Gloucester				
Hudson	4	1	1	2
Hunterdon				
Mercer	5		3	2
Middlesex	11		5	6
Monmouth	8		4	4
Morris	14		8	6
Ocean	3		3	
Passaic	7		4	3
Salem	1			1
Somerset	5		4	1
Sussex	2			2
Union	8		5	3
Warren	2		1	1
Out-of-State	2			2

APPENDIX-22

TABLE 4. UNEMPLOYED NURSES WHO TOOK AND DID NOT TAKE NURSE REFRESHER COURSE INTERESTED IN COURSE AND INTENT TO RETURN TO WORK FULL OR PART-TIME BY COUNTY OF RESIDENCE

NEW JERSEY SURVEY, APRIL 1969

County of Residence	Nurses Unemployed	Took N.R. Course	Did Not Take N.R.C.	Not Stated	Interested in Future Course				Intent To Work			
					Number	Day Time	Evening	Not Stated	Number	Full Time	Part Time	Not Stated
Total	988	37	622	329	445	188	160	97	367	10	346	11
Atlantic	14		8	6	6	3	1	2	7		7	
Bergen	144	4	89	51	69	37	19	13	62	3	58	1
Burlington	26	2	19	5	11	3	4	4	9	1	8	
Camden	41	3	27	11	18	8	4	6	9		9	
Cape May	5		3	2	2	1		1	1		1	
Cumberland	7		6	1	3	1		2	2		2	
Essex	80	4	48	28	45	18	18	9	41	2	39	
Gloucester	12	1	7	4	6	2	2	2	4		3	1
Hudson	10		4	6	4	1	3		3		3	
Hunterdon	20	1	11	8	12	4	6	2	5		5	
Mercer	47	4	29	14	20	8	6	6	12	1	11	
Middlesex	96	1	67	28	48	22	14	12	45		44	1
Monmouth	92	6	57	29	34	17	15	2	26		25	1
Morris	112	4	79	29	59	22	22	15	40	1	35	4
Ocean	28		20	8	11	7	2	2	8		8	
Passaic	68	1	39	28	20	11	6	3	23		22	1
Salem	3		1	2	2	1	1		2		2	
Somerset	57	2	35	20	18	5	9	4	20	2	18	
Sussex	12		7	5	6	3	2	1	5		5	
Union	84	2	50	32	42	10	22	10	35		33	2
Warren	8	1	3	4	3	1	1	1	2		2	
Out-of-State	22	1	13	8	6	3	3		6		6	

APPENDIX-23

NURSE REFRESHER PROGRAM

FINAL REPORT

(Covering grant #K204 for period October 1, 1968 thru December 31, 1968)

TO

NEW JERSEY STATE DEPARTMENT OF HEALTH

EXPLORING MEANS OF CONTINUING NURSE REFRESHER COURSES ON A STATEWIDE BASIS

Submitted by: Hospital Research and Educational Trust of New Jersey
Highway 206, Princeton, New Jersey 08540

Date: May 19, 1969

NURSE REFRESHER PROGRAM FINAL REPORT

Introduction and Background Information

The New Jersey State Department of Health awarded a grant to the Hospital Research and Educational Trust of New Jersey (HRET) for the support of the statewide Nurse Refresher Program from October 1, 1968, through December 31, 1968. The grant followed the termination of Federal support to the project in late September. It provided for the continued services of the coordinator and the secretary. Under the contract provisions, the coordinator would begin to explore ways to continue the Nurse Refresher Program on a statewide basis while maintaining routine program activities.

For 39 months prior to the termination of Federal support, the project was funded under the provisions of the Manpower Development and Training Act of 1964 (MDTA) with the exception of a three month interval in 1967 of industry support.

Administration of the funds was the responsibility of the New Jersey State Department of Education, Vocational Division and the New Jersey State Department of Labor and Industry, Division of Employment Security. The responsibility of the latter division included overseeing the distribution of training and travel allowances to the trainee, maintaining appropriate records, and recruiting prospective students. The Vocational Division, on the other hand, administered all other program funds as well as maintained a role of awareness of refresher program development and progress.

The Nurse Refresher Program was approved for funding on July 1, 1965. The budget in each of the three funding periods included coverage of administrative services, staff salaries and benefits and expenses of courses conducted by participating hospitals. The length of the funding periods varied as did the origin of the funds. However, it can be noted in the breakdown below that MDTA funds were the main source of financial support.

NURSE REFRESHER PROGRAM FUNDING

Period of Funding	Project Number	Source of Funds	Amount of Grant
July 1, 1965 to June 30, 1966	NJ R 8057	MDTA	$308,910
July 1, 1966 to June 30, 1967	NJ R 8057	MDTA	135,179 *
July 1, 1967 to Sept. 26, 1967	-	Industry	11,000
Sept 27, 1967 to Sept. 20, 1968	NJ R 8015	MDTA	24,893
Sept. 21, 1968 to Dec. 31, 1968	-	Hospital Funds	-
Oct. 1, 1968 to Dec. 31, 1968	K 204	N. J. Dept. of Health	5,660 **

* Funds allocated from unused monies of fiscal year 1965-66.

**Grant covered project staff only.

Hospital reimbursement for participation in the project averaged $2,500. This sum, however, did not cover the many donated services (e.g. facilities, personnel, publicity, etc.) which hospitals provided to the project at no cost to the government. These services and personnel estimated a $2,200 to $2,550 per hospital, per class, included guest lecturers, acquisition and maintenance of equipment and supplies, and housekeeping tasks. Periodically hospitals had to cover a portion of the instructor's salary if it exceeded the hourly rate payable under the program. Salaries for instructors were the largest single expense to the project and later to hospitals financing their own courses.

Considering the above expense factors, the cost of a refresher course with an enrollment of twelve students averaged about $5,000. Of this amount, hospitals assumed roughly 44-51 per cent of the expenses.

The first refresher course was initiated in September 1965, two and one-half months after the project's inception. These first months were spent in developing guidelines, publicizing the project, training instructors to develop and conduct refresher courses, interpreting the program to the hospitals, and scheduling courses for the Fall. The project moved along steadily gaining experience in many aspects of refresher training, while witnessing a degree of success in its efforts to retrain and return nurses to their profession. Subsequently, the program gained national recognition for its organizational approach and program successes through several noted publications.

The Materials and Guidelines developed in the New Jersey Refresher Program have been referred to by several government agencies in structuring regulations and reference matter for refresher training for inactive registered nurses under government auspices.

The most widely circulated document coming out of the project was the NURSE REFRESHER PROGRAM GUIDE - FROM START TO FINISH. The publication was developed by the Hospital Research and Educational Trust in April 1967 in response to numerous inquiries ranging from financing and program content to securing funds and selecting trainees. An added purpose of the guide was to offer direction to individuals and groups throughout the United States and foreign countries alike who displayed an interest in or had responsibility for establishing refresher training courses. The publication covers financing, course content, planning and publicity, evaluation and five other related areas plus a bibliography.

During the more than three years of the program, from July 1, 1965, to December 31, 1968, 1,071 nurses completed the program. During this time, 95 courses were provided by 39 different New Jersey hospitals located in 16 of the State's 21 Counties. (See chart next page.)

The courses were conducted in the Spring and in the Fall of the year when children were in school and parents were free to attend classes. Nurses were exposed to a curriculum of current information, new skills and supervised practice of not less than 180 hours and extending to 240 hours. The program covered a period of intense study spread over 6 to 10 weeks.

NURSES ENTERING AND COMPLETING REFRESHER COURSES

From July 1, 1965 and December 31, 1968

Date	# Courses	# Nurses		
		Entering	Leaving	Completing
July 1, 1965 - June 30, 1966	50	609	41	568
July 1, 1966 - June 30, 1967	21	273	27	246
July 1, 1967 - Sept. 20, 1968	19	226	19	207
Sept. 21, 1968 - Dec. 31, 1968	5	52	2	50
TOTALS	95	1160	89	1071 (92.3%)

In 1968, the Hospital Research and Educational Trust mailed questionnaires to the 814 registered nurses who had completed refresher courses between July 1, 1965 and June 30, 1967, a period of two fiscal years. Of this number, 646 questionnaires were returned - a 79 per cent response. The data taken from the questionnaires were compiled and later distributed to 140 institutions throughout the State as a part of a continuing effort to keep hospitals informed of the progress of the Program. A copy of the information sent to the institutions is included as Attachment-1.

FULFILLING CONTRACT COMMITMENTS TO THE N. J. STATE DEPARTMENT OF HEALTH

On August 30, 1968, the Hospital Research and Educational Trust was informed by the New Jersey Department of Education that the Nurse Refresher Program would not be recommended for funding for fiscal year 1968-69. In addition, it was learned that funds supporting the existing program would be terminated on September 20, 1968, approximately seven days earlier than expected.

Advising hospitals of this change in program financing was of immediate importance. Notification went first to the twelve hospitals which had given prior indication of interest as Fall participants. They were asked to proceed, if possible, despite the lack of financial support through the Trust.

The result was the conduct of five courses, funded and sponsored by individual hospitals. Four of the five were represented in the initial Fall schedule. For financial reasons, however, the remaining eight institutions which included a county and a state government hospital discontinued all program plans. One hospital helped to defray expenses by assigning a $30 fee for the course.

Assisting the Trust to continue its refresher program activities, the New Jersey State Department of Health provided a grant to the Trust effective October 1, 1968. The purpose of the grant was to permit the staff to continue performing necessary project activities while exploring ways to allow for the continuation of the Nurse Refresher Program on a statewide basis. The steps taken to accomplish this are outlined in the following pages.

Exploratory and Planning Meetings

Joint meeting

The first in a series of meetings to discuss the future of the Nurse Refresher Program was held at Meadow Lakes, Hightstown, New Jersey on October 1, 1968. Forty-seven hospitals were invited to attend. They included the previously mentioned twelve hospitals plus thirty-five other institutions which either had successfully conducted a refresher course or had attempted to do so.

The meeting dealt with several immediate needs: 1) stimulating the development of additional courses for the benefit of nurses seeking refresher training; and 2) seeking financial support for courses in the Fall and in the remaining year. Other discussion areas included stimulating future courses, joint planning and sharing, role of the community in supporting refresher training, and coordination and recruitment in subsequent months.

Twenty-one persons representing fifteen hospitals attended the meeting. The group was composed of four Directors of Nursing and seventeen Inservice Education Coordinators.

At the close of the day's conference, agreement had been reached in three areas:

- The refresher program should be continued with emphasis on regional planning and sharing among hospitals.
- Coordination of the project should be continued as in previous months under the Trust (HRET), and that funds be sought to support a coordinator's position.
- A charge be established if necessary to help cover expenses in the course. Also alternative means of funding be explored to provide an option to the hospital.

Regional meetings

Following the joint meeting, plans moved quickly to schedule regional planning meetings to commence on November 11. Included in the announcement of the meetings was a series of questions which participants were to consider in preparation for the sessions. Pages 2 and 3 of the Memorandum are shown in the report as Attachment 2. The meetings were held at the following locations:

Middlesex General Hospital, New Brunswick	11 representatives
Holy Name Hospital, Teaneck	15 representatives
West Jersey Hospital, Camden	6 representatives
Mountainside Hospital, Montclair	8 representatives
Jersey Shore Medical Center, Neptune	3 representatives *

The 43 persons attending the five meetings represented 27 institutions.

At each session the group had a chance to more accurately define what they saw as the role of the hospitals in a joint refresher program effort. Also how they could best coordinate their plans for best use of facilities, staff, and resources.

How courses were to be financed was of equal concern since at the time of the meeting many hospitals were still uncertain as to their ability to participate without financial assistance. Tuition and cooperative sharing and planning were considered alternative methods of supporting at least one or two courses in the

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* (The representative from Riverview was unable to attend.)

various regions until other funds could be identified and acquired. Several representatives did reject the suggestion that a charge be made for the course, however, they did agree to abide by the wishes of the majority. Further discussion and planning would take place in followup sessions tentatively scheduled for early 1969.

Several representatives from each group agreed to serve on a Committee to assist the Coordinator in formulating a suggested plan for Nurse Refresher Program progression. Comments and suggestions made at the meeting as well as the names of the committee representatives are on file at the Hospital Research and Educational Trust.

Followup Meetings

In January two followup meetings were held, one at the Holy Name Hospital and the other at the Perth Amboy General Hospital for the purpose of deciding where and on what dates courses would be offered and what progress was being made by the Association in obtaining financial assistance. The response was small as compared with the first regional meetings. At Holy Name Hospital, for example, only four hospitals and one nursing home representative were present. At the Perth Amboy General Hospital meeting there were three hospitals represented.

COMMITTEE PARTICIPATION

The Committee's work took place over a two-day period at the Hospital Association headquarters. The summary of their work is incorporated in the recommendations and accompanying statements.

RECOMMENDATIONS

1. THE NURSE REFRESHER PROGRAM BE CONTINUED UNDER THE SPONSORSHIP OF THE NEW JERSEY HOSPITAL ASSOCIATION IN CONJUNCTION WITH THE HOSPITAL RESEARCH AND EDUCATIONAL TRUST OF NEW JERSEY.

   The N. J. Hospital Association through the Trust (HRET) has demonstrated its ability to effectively coordinate a broadly structured nurse refresher program.

2. A FULL-TIME COORDINATOR BE ASSIGNED TO THE PROGRAM TO ENSURE CONTINUITY. THE RESPONSIBILITIES AND DUTIES SHOULD REFLECT AN EXTENSION INTO EXPERIMENTATION IN THE USE OF VARIOUS EDUCATIONAL MEDIA AND MATERIALS, PROGRAM REORGANIZATION AND EXPANSION.

   The committee saw the role of a full-time coordinator as the following:
   - consult with institutions giving refresher courses.
   - aid in regional planning to fulfill the need in specific areas.
   - contact resource people who could render assistance.
   - inform Inservice Education Coordinators about programs, ideas, new teaching tools via a monthly newsletter.
   - investigate new methods of presenting the program through state colleges and universities.
   - act as a clearing house for response to inquiries about refresher programs and direct applications to cooperating hospitals.
   - help evaluate programs at their conclusion and summarize findings.
   - form a committee and act as chairman for future planning, services and the like.

3. FINANCIAL SUPPORT BE ON A CONTINUING BASIS, PROVIDED ANNUALLY FROM A DESIGNATED SOURCE.

   Based on past experiences of the Nurse Refresher Program and in light of data collected by the N. J. Hospital Association and the New Jersey Department of Health, approximately 200-300 inactive registered nurses will seek admission annually to a nurse refresher course. The expense per student will average $417. A program, therefore, designed to reactivate 200 nurses at $417 each will cost approximately $83,400 per year.

4. EVALUATION, WHICH PREVIOUSLY RECEIVED LITTLE SUPPORT, BECOME A BASIC AND ACCEPTABLE PART OF THE PROGRAM WITH PROCEDURES FOR EVALUATION ESTABLISHED AS AN INTEGRAL PART OF THE PROGRAM.

5. INSTITUTIONS BE ENCOURAGED TO POOL RESOURCES AND FACILITIES AT THE LOCAL LEVEL FOR A MORE ECONOMICALLY BENEFICIAL PROGRAM APPROACH.

6. REGISTERED NURSES WHETHER EMPLOYED OR UNEMPLOYED (INACTIVE), PART-TIME OR FULL-TIME, RECEIVE CONSIDERATION FOR REFRESHER TRAINING OF A GENERAL AS WELL AS A SPECIALIZED NATURE.

   The numbers of nurses working in specialized areas inside and outside the hospital are increasing. They are found in school nursing, office nursing, public health nursing, and in maternal and child health units of general hospitals. Their need and desire for updating, similar to that of the returning inactive nurse, is important and real.

ATTACHMENT-1

NURSE REFRESHER PROGRAM

To: Member Institutions of New Jersey Hospital Association

From: Hospital Research and Educational Trust of New Jersey

Subject: A Summary of Survey Findings

A survey of nurses completing refresher courses between July 1965 and June 1967, a period of two fiscal years, was concluded by HRET in June 1968. The purposes of the survey were (1) to get current information on the employment status of nurses completing refresher courses during the two year period, their places of employment or, if not employed, the reasons for not working; (2) to ascertain the opinions of the nurses as to the course content and conduct; and (3) to make the findings known to all institutions.

A chart has been compiled, from the returned questionnaires, which contains pertinent data on the current working status of the reactivated nurse. A copy is attached for your reference.

You will note that questionnaires were mailed to 814 inactive nurses with 646 responding--a return rate of 79.4%. Of those responding nearly two-thirds are working, with the greater proportion of this number (73%) employed in hospitals. Extended care facilities and nursing homes are second to hospitals in the employment of the reactivated nurse.

At this time it would seem appropriate to give supplementary information relating to the subsequent months of the project. For fiscal year 1967-1968 two hundred and seven nurses were graduated from nineteen refresher courses. Consequently, the nurses prepared for re-entry into their profession totalled 1,021. This additional nurse manpower has helped to relieve some of the more critical nursing needs in health institutions and agencies around the State.

In the beginning of the fourth year, despite the fact that Federal funds were not available, six hospitals were still able to provide refresher courses to aid nurses who were desirous of returning to active nursing. From the number of inquiries received it was apparent that at least five additional refresher courses would have increased the availability of prepared, professional nurses for immediate employment.

ATTACHMENT-1

SALIENT STATISTICS, NURSE REFRESHER COURSES 1965-67

QUESTIONNAIRES	Number	Percent
Mailed	814	100.0
Returned	646	79.4
Not Returned	168	20.6

EMPLOYMENT STATUS

	Number	Percent
TOTAL RESPONDENTS	646	100.0
Working in Nursing	426	65.9
Full-time	91	14.1
Part-time	329	50.9
Volunteer	6	0.9
Not Currently Working	211	32.8
Worked Previously	108	16.8
No Work After Completing Course	103	16.0
Working Outside Nursing	7	1.1
Deceased and Not reported	3	0.2

PLACE OF EMPLOYMENT

	Number	Percent
Hospitals	311	73.0
Nursing Home, Extended Care Facilities	29	6.8
School	24	5.6
Doctors' Offices	18	4.2
Business, Industry	13	3.1
Public Health	5	1.2
Other 1/	20	4.7
Volunteers 2/	6	1.4
TOTAL	426	100.0

1/ Bloodmobile, penal institutions, Cerebral Palsy Association, Etc.
2/ Nursery School, home, etc.

HRET/NRP
6/25/68

ATTACHMENT-2

(Below is a copy of Pages 2 and 3 of a Memorandum dated October 30, 1968)

NURSE REFRESHER PROGRAM

To: Directors of Nursing
Directors of Inservice Education

From: Mineva A. Mayberry, R. N.
Coordinator, Nurse Refresher Program

Re: Regional Planning for Nurse Refresher Courses

As a result of a grant from the New Jersey Department of Health, the next several months will be devoted to the further development of a PLAN that will guide future training for inactive nurses. The degree to which the plan will be useful to you will depend on your participation in its development. A series of regional meetings planned for this purpose are listed below, and we invite you to attend the meeting nearest you. A return postcard is enclosed for your response.

Meeting Places	Date	Time
Middlesex General Hospital New Brunswick, New Jersey	Monday, November 11	11:30 a.m.-2:15 p.m. (luncheon served)
Mountainside Hospital Montclair, New Jersey	Wednesday, November 13	1:00 p.m.-3:00 p.m.
Holy Name Hospital Teaneck, New Jersey	Friday, November 15	10:00 a.m.-12 noon
Jersey Shore Medical Center Neptune, New Jersey	Friday, November 15 (rescheduled for Nov. 27 at 12:30 p.m.)	2:00 p.m.-4:00 p.m.
West Jersey Hospital Camden, New Jersey	Monday, November 18	10:00 a.m.-12 noon

To prepare for the meeting, please consider the following questions for discussion:

1. What role should the Trust and the Hospital Association play in future refresher training?
2. Is there a role for the college, the university, and the school of adult education?
3. What shall be the responsibility of the Coordinator?
4. Should the refresher program be reorganized? If so, what changes would you suggest?
5. If there is to be a charge for a refresher course, what should it be?
6. Are there other means of financing local refresher courses?
7. Should there be created a cooperative plan for the sharing of facilities and instructional personnel among participating hospitals? How can it be made workable, yet flexible?
8. How can we capture and maintain the interest of inactive nurses from the time they leave nursing until they are free to return to nursing?

I look forward to seeing you at one of the meetings!

APPENDIX-24

INACTIVE HEALTH PERSONNEL PROJECT

By County, Employed And Unemployed Nurses In The Year 1966
Who Took A Nurse Refresher Course In 1965 And 1966

County	Employed In 1966	Unemployed In 1966	Total
01 - Atlantic	11	11	22
02 - Bergen	111	92	203
03 - Burlington	23	8	31
04 - Camden	31	22	53
05 - Cape May	3	4	7
06 - Cumberland	0	0	0
07 - Essex	75	45	120
08 - Gloucester	14	13	27
09 - Hudson	21	20	41
10 - Hunterdon	1	0	1
11 - Mercer	18	9	27
12 - Middlesex	25	24	49
13 - Monmouth	62	52	114
14 - Morris	42	27	69
15 - Ocean	9	13	22
16 - Passaic	22	21	43
17 - Salem	5	1	6
18 - Somerset	13	8	21
19 - Sussex	4	2	6
20 - Union	47	39	86
21 - Warren	1	2	3
91 - Out-of-State	47	5	52
TOTALS	585	418	1003

APPENDIX-25

INACTIVE HEALTH PERSONNEL PROJECT

By County, Employed And Unemployed Nurses In The Year 1968
Who Took A Nurse Refresher Course Between 1965 And 1968

County	Employed In 1968	Unemployed In 1968	Total
01 - Atlantic	12	10	22
02 - Bergen	127	76	203
03 - Burlington	10	21	31
04 - Camden	37	16	53
05 - Cape May	2	5	7
06 - Cumberland	0	0	0
07 - Essex	82	38	120
08 - Gloucester	19	8	27
09 - Hudson	26	15	41
10 - Hunterdon	0	1	1
11 - Mercer	18	9	27
12 - Middlesex	31	18	49
13 - Monmouth	73	41	114
14 - Morris	48	21	69
15 - Ocean	12	10	22
16 - Passaic	25	18	43
17 - Salem	4	2	6
18 - Somerset	18	3	21
19 - Sussex	4	2	6
20 - Union	55	31	86
21 - Warren	3	0	3
91 - Out-of-State	47	5	52
TOTALS	664	339	1003

APPENDIX-26

ROSCOE P. KANDLE, M.D., M.P.H
STATE COMMISSIONER OF HEALTH

CURTIS F. CULP, M.D.
ASSISTANT COMMISSIONER FOR HEALTH FACILITIES

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, N. J. 08625

November 21, 1969

Mrs. Agnes Clark, Chairman
Department of Nursing
The County College of Morris
Ridgedale Avenue
Hanover, New Jersey 07936

Dear Mrs. Clark:

This Department is in the process of terminating a federally funded Inactive Health Manpower Project, with Mrs. Geraldine Schiavone, R.N., M.A., as the Project Coordinator. The large number of inactive nurses in New Jersey and ways to return many of them to active employment have been major concerns to which a great deal of effort has been expended during the past two years.

At the inception of the Project and through September 1968, nurse refresher training was available under the aegis of the New Jersey Hospital Research and Educational Trust, under the direction of Mrs. Mineva Mayberry and funded by Manpower Development and Training Act Funds.

Since the fall of 1968, the refresher programs available to inactive nurses have diminished and at the present time, as far as we can determine, there are only four ongoing refresher programs available in hospitals in New Jersey. At the same time, hundreds of nurses across the State have expressed a desire for refresher training.

As a member of the Nursing Education Advisory Committee of the New Jersey State Department of Higher Education, I have had the privilege of working with Mrs. Carol Murtagh and Mrs. Ruth Lee. The need for refresher training was discussed briefly and it was suggested by them that this matter be brought to your attention because of your leadership position with the chairmen of community college nursing programs.

If your group is interested in pursuing this, we are in a position to furnish the names and addresses of nurses who have expressed an interest in refresher training. Even though our Project will terminate shortly, we will continue to do whatever we can from this office to help relieve the nursing shortage.

We will appreciate hearing from you as to the receptivity and readiness of community college nursing programs in relation to establishing refresher training opportunities. Thank you so much for your consideration of this matter.

Sincerely,

Johanna E. Kennedy

(Mrs.) Johanna E. Kennedy
State Coordinator
Consultative Services, Health

JEK/dd

POPULATION IN EACH OF THE 21 COUNTIES IN NEW JERSEY
AS OF JULY 1, 1966 ESTIMATES. TOTAL POPULATION, 6,959,650.

APPENDIX-27

Key
* Indicates Number of Professional Nurses
Active in Each County In 1966.

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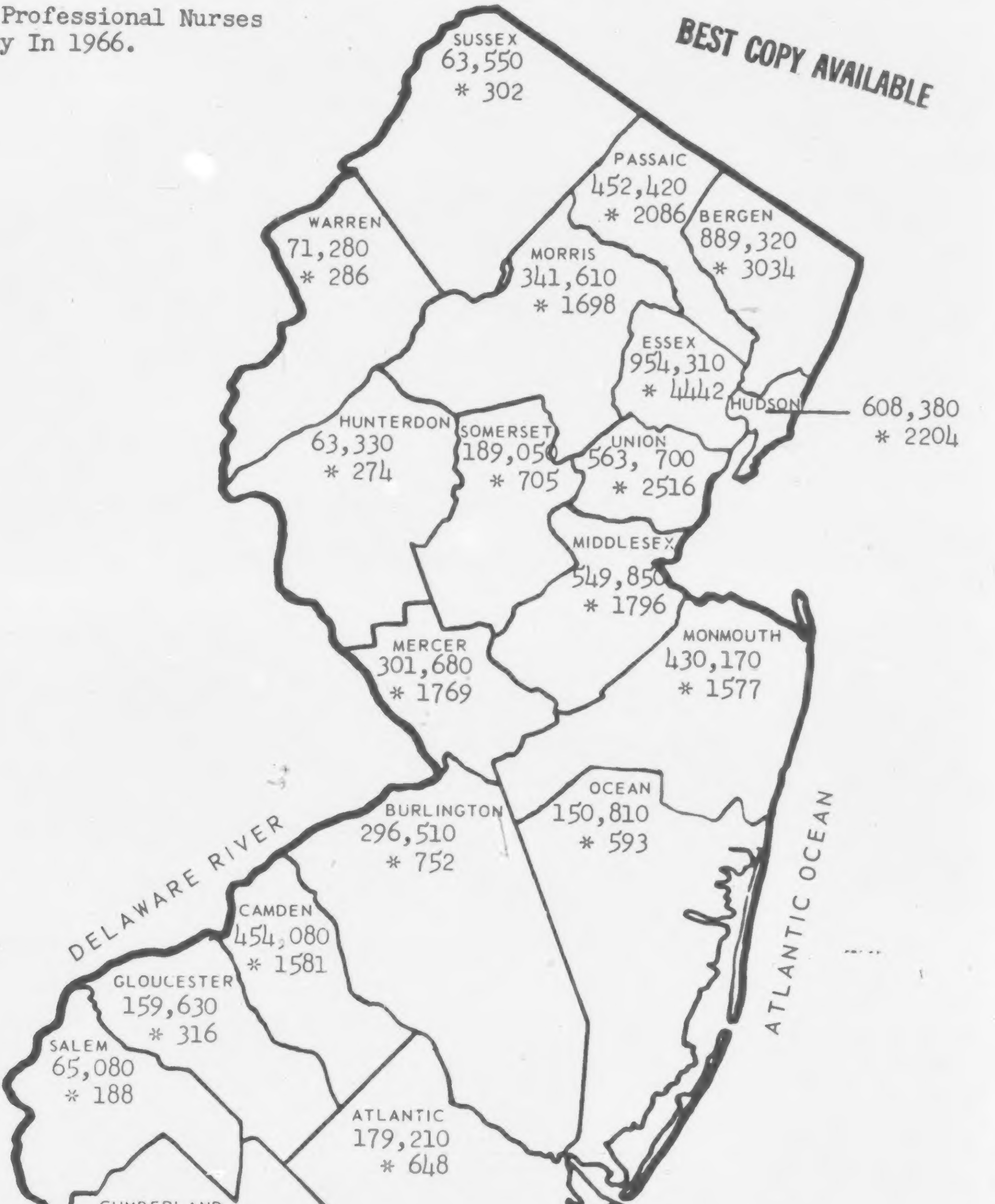
SUSSEX
63,550
* 302
PASSAIC
452,420
* 2086
BERGEN
889,320
* 3034
WARREN
71,280
* 286
MORRIS
341,610
* 1698
ESSEX
954,310
* 4442
HUDSON
608,380
* 2204
HUNTERDON
63,330
* 274
SOMERSET
189,050
* 705
UNION
563, 700
* 2516
MIDDLESEX
549,850
* 1796
MERCER
301,680
* 1769
MONMOUTH
430,170
* 1577
OCEAN
150,810
* 593
BURLINGTON
296,510
* 752
DELAWARE RIVER
ATLANTIC OCEAN
CAMDEN
454,080
* 1581
GLOUCESTER
159,630
* 316
SALEM
65,080
* 188
ATLANTIC
179,210
* 648
CUMBERLAND
122,850
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CAPE MAY
52,830
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DEPARTMENT OF HEALTH

STATE OF NEW JERSEY

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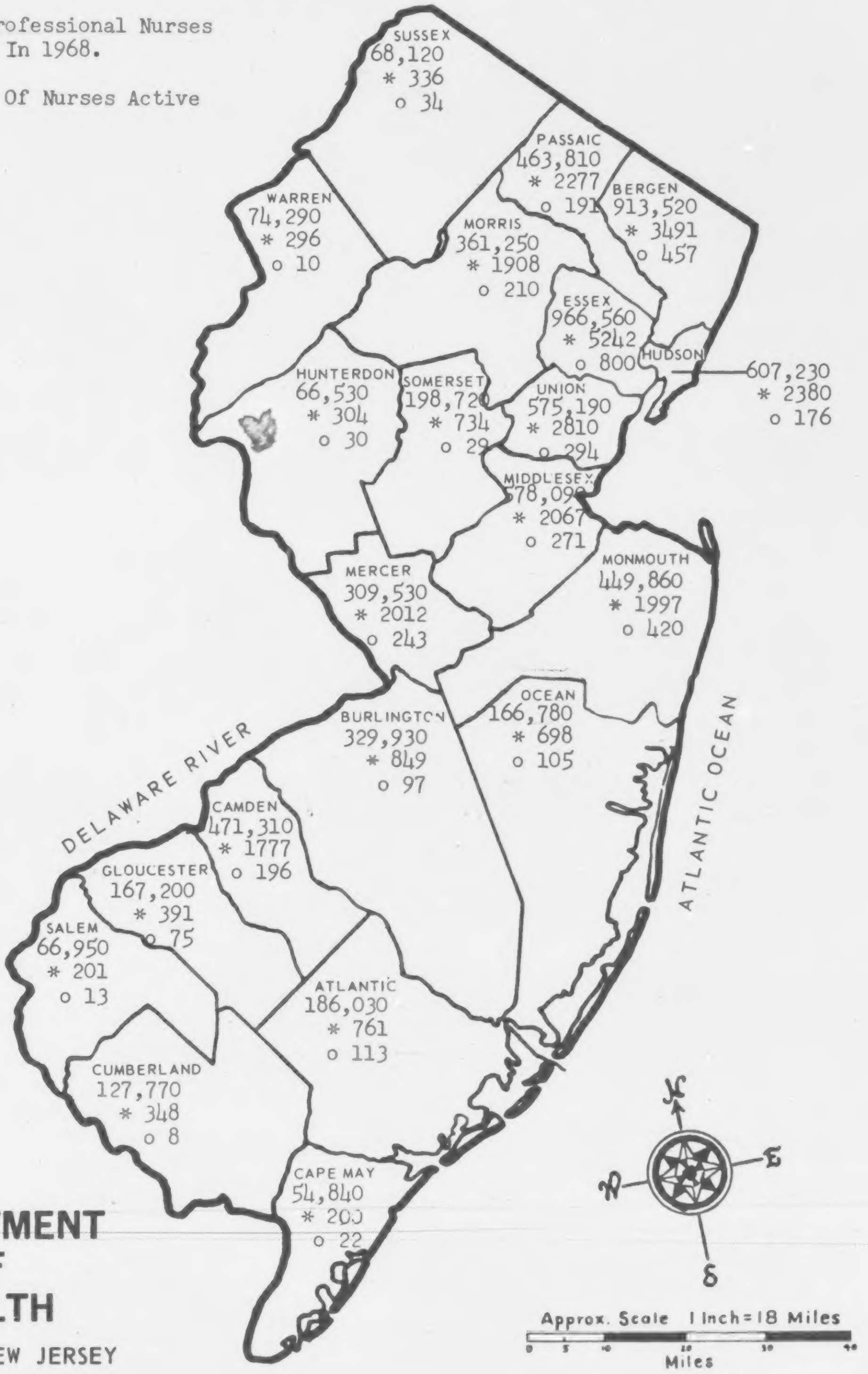
APPENDIX-28

POPULATION IN EACH OF THE 21 COUNTIES IN NEW JERSEY
AS OF JULY 1, 1968 ESTIMATES. TOTAL POPULATION, 7,203,510.

Key
*Indicates Number of Professional Nurses Active In Each County In 1968.

oIndicates Plus Number Of Nurses Active In 1968 Over 1966.


SUSSEX
68,120
* 336
o 34
PASSAIC
463,810
* 2277
o 191
BERGEN
913,520
* 3491
o 457
WARREN
74,290
* 296
o 10
MORRIS
361,250
* 1908
o 210
ESSEX
966,560
* 5242
o 800
HUDSON
607,230
* 2380
o 176
HUNTERDON
66,530
* 304
o 30
SOMERSET
198,720
* 734
o 29
UNION
575,190
* 2810
o 294
MIDDLESEX
578,090
* 2067
o 271
MERCER
309,530
* 2012
o 243
MONMOUTH
449,860
* 1997
o 420
OCEAN
166,780
* 698
o 105
BURLINGTON
329,930
* 849
o 97
DELAWARE RIVER
ATLANTIC OCEAN
CAMDEN
471,310
* 1777
o 196
GLOUCESTER
167,200
* 391
o 75
SALEM
66,950
* 201
o 13
ATLANTIC
186,030
* 761
o 113
CUMBERLAND
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DEPARTMENT OF HEALTH

STATE OF NEW JERSEY

APPENDIX-29

INACTIVE HEALTH PERSONNEL PROJECT

CORRELATION OF THE YEAR 1968 TO 1966 EMPLOYMENT STATUS OF LICENSED, PROFESSIONAL NURSES, BY COUNTY, IN NEW JERSEY

County	Remained Inactive	Remained Active	Active To Inactive	Inactive To Active	Newly Licensed In 1967 & 1968	Did Not Renew In 1968	Total Less No Renews
Unknown	118	832	377	223	11		1,561
Atlantic	32	534	111	141	64		882
Bergen	338	2780	1036	719	390		5,263
Burlington	53	682	169	148	103		1,155
Camden	83	1344	279	336	210		2,252
Cape May	10	147	33	39	26		255
Cumberland	7	282	47	72	9		417
Essex	245	3705	679	965	463	1	6,057
Gloucester	26	296	110	76	25		533
Hudson	93	1783	303	449	138	2	2,766
Hunterdon	21	238	70	65	14		408
Mercer	112	1492	349	394	188		2,535
Middlesex	179	1593	565	417	187	1	2,941
Monmouth	163	1378	467	414	193		2,615
Morris	167	1500	505	392	160		2,724
Ocean	58	498	149	152	67		924
Passaic	141	1765	410	456	135		2,907
Salem	7	158	34	38	7		244
Somerset	89	616	253	167	37		1,162
Sussex	32	244	66	83	44		469
Union	236	2142	685	582	215		3,860
Warren	25	236	67	79	10		417
Out-of-State	26	7497	84	2109	305		10,021
TOTAL	2261	31,742	6848	8516	3001	4	52,368
TOTAL (Less Out-of-State)	2235	24,245	6764	6407	2696		42,347

NEW JERSEY STATE DEPARTMENT OF HEALTH

APPENDIX-30

Report of the Health Occupations Unit
Division of Vocational Education
The Department of Education
Trenton, New Jersey

Director, Joan M. Birchenall

Practical/Vocational nursing was not excluded when the societal demands in nursing personnel made an improved education mandatory. Rogers made this point clear where she said: "The level and scope of nursing practice will not exceed the kind and amount of education that precede it."[1] "Therefore, we in N. J. find with few exceptions that P. N. education is located in Area Vocational-Technical Schools. The student meets school admission and graduation requirements, enjoys student privileges and meets all student obligations. The program is planned, is in sequence, with learning experiences in various health agencies developed as laboratory experiences.

However, there did remain an unfulfilled responsibility. It was obvious that an important segment of this supportive and collaborative force-namely, the practical nurse licensed by waiver--was ill prepared to carry out the assisting role to the nurse of professional status. (It will be noted that the word "professional" is not used here in the sense that it is incorporated in the licensure laws.) Therefore, a Curriculum Guide was designed by the Health Occupations Unit Division of Vocational Education, State Board of Education, Trenton, N. J. for the iniation of programs of Health Occupations by local school districts to:

1. offer the practical nurses licensed by waiver the opportunity to develop their full potential and to assist in meeting the health needs of the citizens in the State of New Jersey.

2. help the practical nurses licensed by waiver to become licensed by examination so that they may obtain employment that would fully use their present skills.

To date, there are two exemplary programs in progress. At the Monmouth County Area Vocational-Technical School, 10 of the 20 students who enrolled will undoubtedly successfully complete the course in April 1970. This experimental group has an average age of 50. They have exhibited the expected difficulties in the re-development of study, reading, and testing skills. With one exception, the individual performance on NLN Achievement Tests were never above the 10th percentile. The exception being the Elementary Psychiatric Nursing Test, on which the achievement of 3 students was at the 80th (or above) percentile, with 3 students achieving at the 30th percentile, which was also the class mean. As indications, these results tend to justify our beliefs that these particular students would profit most from a curriculum which employed a progressive organization of selected subject matter within the framework of the continuity of experience they already possessed. The teachers' grades and progress evaluations tend also to support the premise that the organization of the studies into a new system of management would deal best with the causes of the problems of this particular learner. At this date, it is still to early to categorize our observations as any more than indications, as data is still being accumulated.

The second exemplary program began in October with 13 enrolled. It is located in the Union County Area Vocational-Technical Institute in Scotch Plains, N. J. It is, of course, too early for any meaningful feed back at this time.

State Board scores and follow-up of the student on the job will be a part of the total data to be evaluated by the staff of the Health Occupations Unit and consultants to revise the present guidelines.

I conclude this report with this statement from the Curriculum Guidelines: "(They) will serve their function-only if they are conceived as a foundation, continuously and cooperatively re-evaluated. As new insights are gained, a broader and more significant curriculum will evolve."[2]

"The primary purpose of this project will have been accomplished if it is conceived-not as an end in itself-but, as an idea suggested as a means to aid organized nursing to meet its current needs."[3]

Respectfully submitted,

Erma E. Clarke

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1. Rogers, Marsh. Educational Revolution in Nursing. New York. MacMillan Co., 1961 , p. 8.
2. Clarke, Erma. Curriculum Guidelines For The P. N. Licensed By Waiver In The State of N. J. Department of Education, Health Occupations Unit, 1968, p. 10.
3. Ibid. p. 11

JUL 29 1969

APPENDIX-31

Hospital and Health Council of Metropolitan New Jersey, Inc.

134 EVERGREEN PLACE EAST ORANGE, N. J. 07018

William Lowery
~~ARTHUR E. BROWN~~
EXECUTIVE DIRECTOR

(201) 674-1422

July 28, 1969

Mrs. Geraldine R. S. Schiavone, R.N., M.A.
Project Nurse Coordinator
Department of Health
John Fitch Plaza
P. O. Box 1540
Trenton, New Jersey 08625

Dear Mrs. Schiavone:

Thank you very much for keeping me posted on what I now think of as the "Nurses Substitute Project".

We continue to be interested and it appears now as if it is feasible provided we can find the funds for the manpower required to staff the project on a permanent basis. I will be leaving on vacation to return August 25th, and at that time I will be in touch with you as to the next steps. Perhaps we can arrange to meet at some mutually convenient time to discuss the details.

Best wishes.

Cordially,

Joseph D. Pikus, Ed. D.
Director, Program Planning
and Development

JDP:mar

HOSPITAL AND HEALTH COUNCIL OF METROPOLITAN NEW JERSEY, INC.
134 EVERGREEN PLACE EAST ORANGE, N.J. 07018

AGENDA

NURSING COMMITTEE
November 18, 1969
2:30 P.M.

Metropolitan State Health
District Office
1100 Raymond Boulevard
Newark, N.J.

I. Minutes of October 21st meeting

II. Introduction of Miss Evelyn Mooney, Assistant Director of Newark Beth Israel Medical Center, Director of Nursing Service

III. Report of Planning and Development Committee, Sister Teresa Harris

IV. Referral forms for hospitals, extended care facilities, health agencies and schools

V. Substitute Nurse Service Project, Mrs. Geraldine Schiavone

VI. Status of Senate Bill 814 re amendments to act concerning schools of professional nursing

VII. New business

APPENDIX-33

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

Stand Up and Be Counted!

Your Profession Needs You!!!

In January 1967, questionnaires were mailed to all New Jersey Dietetic Association members, asking for information on employment status and interest in continued education. This information has been used to set up a partial roster of professional dietitians. This was part of a national project of the American Dietetic Association: Recruiting, Training, and Utilization of Consultant and Part-time Nutritionists and Dietitians for Community Services. Thirty-three states have, to date, participated in this project.

The demand for professionally qualified dietitians and nutritionists on a full-time, part-time or consultant basis, is growing daily. In order to maintain a current roster, information must be updated frequently. Since we are now in the age of automation, we are able to computerize the data, to save valuable time. The enclosed questionnaire has been developed for data processing methods. It is also being distributed to dietitians who are not presently ADA members, to have a more complete picture of the dietetics field in New Jersey. Information will enable us to assess the area employment potential and also assist in planning needed refresher training.

Please complete and return the questionnaire and this letter to Nutrition Program, New Jersey State Department of Health, P. O. Box 1540, Trenton, New Jersey 08625, whether or not you are presently employed and whether or not you completed one last year. The information will be kept confidential and no data will be released without your permission.

Please note -

If you are not working and expect to return to active employment in a year or less, and/or would like to receive information on Refresher Courses to be given within the next 12 - 18 months period please complete the bottom portion of this page including Signature and return with your questionnaire.

1. I hereby grant permission to release my name and address for employment.

Yes ☐ No ☐

2. I hereby grant permission to release my name and address for refresher course information.

Yes ☐ No ☐

Signature ______________________________

BEST COPY AVAILABLE

APPENDIX-34

ROSCOE P. KANDLE, M.D., M.P.H.
State Commissioner of Health

JOHN B. VAN ELLIS, Director
Division of Administration

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, 08625

1. County in which you reside? ____ Zip Code ____

2. Age at last birthday ____ 3. Home phone number (   )

4. What degree(s) do you hold? (Indicate major)

☐1. Baccalaureate(   ) ☐2. Masters(   ) ☐3. Doctorate(   )

5. Are you now or have you ever been a member of the American Dietetic Association? ☐Yes ☐No

6. Employment Status. Please check the ONE item which most nearly represents your situation. ☐1 Employed full-time as Nutritionist or Dietitian. ☐2 Employed part-time as Nutritionist or Dietitian. ☐3 Not gainfully employed. ☐4 Employed but not as a Nutritionist or Dietitian.

7. Number of years work experience? ☐1-4 ☐5-9 ☐10-14 ☐15 or more.

8. Major work experience

	No. of years		No. of years
1 ☐ Hospital, Administration	____	4 ☐ Teaching	____
2 ☐ Hospital, Therapeutic	____	5 ☐ School Lunch	____
3 ☐ Public Health	____	6 ☐ Other(please specify)	____

9. ☐Present OR ☐ Last position held:

10. ☐Present OR ☐ Last employer:

Name ____ Phone (   )

Address

11. In what type(s) of further education are you interested?

☐ 1 Refresher course(s) ☐ 2 Credit course(s) ☐ 3 Advanced degree ☐ 4 None

12. When could you attend course(s)?

☐ 1 Day ☐ 2 Late afternoon ☐ 3 Evening ☐ 4 Summer school ☐ 5 Could not attend

13. What course(s) would you attend within the next 12 - 18 months?

1 ☐ Nutrition
2 ☐ Diet Therapy
3 ☐ Biochemistry
4 ☐ Quantity Foods
5 ☐ Dietary Consultation
6 ☐ Food Purchasing
7 ☐ Equipment and Layout
8 ☐ Personnel Management
9 ☐ Sanitation
10 ☐ Teaching Techniques
11 ☐ Menu Planning
12 ☐ None
13 ☐ Other (please specify) ____

Continue on reverse side

BEST COPY AVAILABLE

14. What types of work or community services would you consider if you were to:
☐ a. Change employment ☐ b. Do voluntary work ☐ c. Return to work

☐ 1 Hospital Dietetics ☐ 2 Consultation to nursing homes and small hospitals. ☐ 3 Diet counseling with patients referred by doctors ☐ 4 Community classes for handicapped homemakers, diabetics arthritics, etc. ☐ 5 Pre-natal classes ☐ 6 Head start programs, special education ☐ 7 Vocational training for food service workers and supervisors, home health aides ☐ 8 School lunch program ☐ 9 Public health nutrition ☐ 10 Teach nutrition and diet therapy in schools of nursing and schools of practical nursing ☐ 11 Teach nutrition and/or institution administration in Junior and community Colleges and vocational schools. ☐ 12 Other (please specify):

The following questions should be answered ONLY by those who are not employed at the present time. In either case please SIGN and RETURN this questionnaire and accompanying letter.

15. How long has it been since you worked as a Nutritonist or Dietitian? __________ years

16. Select from the reasons below the ONE you consider most important for your not being presently employed.

01 ☐ Employment opportunities in my field are not available locally.
02 ☐ Employers cannot utilize the working hours I have available.
03 ☐ I cannot make suitable arrangements for my children.
04 ☐ Transportation is difficult to arrange
05 ☐ I am enrolled as a student obtaining further preparation in dietetics.
06 ☐ The salary I would receive would not make it worthwhile.
07 ☐ I am not able to secure domestic help which would be needed if I returned to work.
08 ☐ Health does not permit my return to work.
09 ☐ I have not been active in my field for a while.
10 ☐ I prefer volunteer community activities.
11 ☐ I prefer to be at home while my children are young.
12 ☐ I am no longer interested in this field as an occupation.
13 ☐ I am retired.
14 ☐ Other (please specify): __________

17. Do you expect to return to work in the nutrition or dietetic field in the future?

1 ☐ Definitely yes 2 ☐ Probably yes 3 ☐ Uncertain 4 ☐ Definitely no 5 ☐ Probably no

NOTE: If you checked answer 1 or 2 answer all the remaining questions. If you checked 3, 4, or 5 DO NOT complete the remaining questions. In either case please SIGN and RETURN this questionnaire and the accompanying letter.

18. How soon do you intend to return to work? Less than 1 year OR in __________ years

19. When you return will you work: 1 ☐ Full-time 2 ☐ Part-time 3 ☐ Uncertain

20. Do you have a car available? 1 ☐ Yes 2 ☐ No

21. How far from home are you willing to travel? No. of miles __________

22. Is your address as shown on this questionnaire correct? ☐ Yes ☐ No. If not, please indicate your correct address.

Signature

REMARKS:

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APPENDIX-35

SURVEY OF OCCUPATIONAL STATUS OF DIETITIANS AND NUTRITIONISTS IN THE STATE OF NEW JERSEY

MARGARET P. ZEALAND, Coordinator, Nutrition Program
ROSEMARY JOHNSTON, Northern District Nutrition Consultant
ANNA P. HALKOVICH, Coordinator, Public Health Statistics Program
all with the New Jersey State Department of Health.

In cooperation with the New Jersey Dietetic Association, the New Jersey Home Economics Association, and the New Jersey State Department of Health, a manpower questionnaire was mailed to 533 nutritionists and dietitians living in New Jersey for information on the manpower status of this profession. Four hundred three questionnaires were returned and of this number 267 or 66.3 percent reported they were employed and 134 or 33.2 percent responded they were not employed at the present time. Of the 267 employed, 74 percent are employed full time and 134 or one-third of all respondents are not employed. Of the 54 who are employed outside of the dietetic or nutrition field, 20 are employed in related fields in home economics and 34 are working in other professions. Table 1, which follows presents the information on employment.

Table 1. Employment Status, Number and Percent

	Number	Percent
Total Response	403	100.0
Employed	267	66.3
Not Employed	134	33.2
No Response	2	0.5
Employment:		
Full-time	198	49.1
Part-time	69	17.1
Not employed	134	33.3
No response	2	0.5
Employed:		
Full-time:	198	100.0
Nutrition	144	72.7
Home Economics	20	10.1
Other	34	17.2
Part-time:	69	100.0
Nutrition	68	98.6
Home Economics	0	—
Other	1	1.4

Age Distribution

Most of the persons who replied to the question on age were between the ages of 30 and 49. Of the 381 who indicated their age, 250 were 30 to 49 years old. Of interest is the fact that 184 of the respondents were below age 40 and 197 are 40 or older. The following table is the age distribution of the respondents.

Table 2. Age Distribution

	Number	Percent of Total
All Ages	403	100.0
20 – 29 years	60	14.9
30 – 39 "	124	30.8
40 – 49 "	126	31.3
50 – 59 "	53	13.1
60 plus	18	4.5
Unstated	22	5.4

The fact that only 60 dietitians are in the 20–29 age group points up a problem for recruitment. Unless more young persons are attracted to this profession during the next decade, there will be a severe shortage in New Jersey.

Highest Degree Held

Of the 403 persons who returned their questionnaires, four did not answer the question on degrees held. There were 294 respondents or 73 percent who held bachelor degrees, 100 who had master degrees and five who held doctorate degrees. (At this point in time, two of the respondents holding doctorates are deceased.)

Reasons for Unemployment

Of the 134 respondents who are college graduates and who gave reasons for unemployment, 117 (87%) hold bachelor degrees, 16 have master degrees and one holds a doctorate (the latter was retired and is now deceased.)

The largest number of the respondents who were unemployed were those who preferred to be at home while their children were young. This group numbered 80 and represented 60 percent of the total (134). Eight of these persons hold master degrees and 72 have bachelor degrees.

Additional reasons given for unemployment at the time of the survey were:

Eight women are unable to make suitable arrangements for their children.

Two need domestic help in order to return to work.

Six persons (five having bachelor degrees and one with a master) state that employment opportunities in their field are not available locally.

Five with bachelor degrees and one with a master stated that the salary they would receive would not make it worthwhile.

Four (three with a bachelor degree and one holding a master) say that employers cannot utilize the working hours they have available. For detail concerning unemployment and degrees held see Table 3.

Table 3. Highest Degree Held by Reasons for Unemployment

Reasons for being unemployed at present	Total	Bachelor's Degree	Master's Degree	Doctorate
Total	134	117	16	1
01. Employment opportunities in my field are not available locally.	6	5	1	
02. Employers cannot utilize the working hours I have available.	4	3	1	
03. I cannot make suitable arrangements for my children.	8	8		
04. Transportation is difficult to arrange.	—			
05. I am enrolled as a student obtaining further preparation in dietetics.	2	2		
06. The salary I would receive would not make it worthwhile.	6	5	1	
07. I am not able to secure domestic help which would be needed if I returned to work.	2	2		
08. Health does not permit my return to work.	3	2	1	
09. I have not been active in my field for a while.	3	3		
10. I prefer volunteer community activities.	3	2	1	
11. I prefer to be at home while my children are young.	80	72	8	
12. I am no longer interested in this field as an occupation.	—			
13. I am retired.	2	1		1
14. Other	10	8	2	
15. No response	5	4	1	

Table 4. Full-Time and Part-Time Employment of Respondents by County of Residence

County	Total Response	Employment Status		
		Full-Time	Part-Time	Unemployed or No Response
New Jersey	403	198	69	136
Atlantic County	5	3	2	
Bergen County	68	35	6	27
Burlington County	20	8	3	9
Camden County	26	16	6	4
Cape May County	1			1
Cumberland County	3	1	2	
Essex County	59	34	9	16
Gloucester County	7	1	1	5
Hudson County	15	10	1	4
Hunterdon County	9	6		3
Mercer County	23	12	3	8
Middlesex County	27	14	6	7
Monmouth County	19	7	3	9
Morris County	37	16	7	14
Ocean County	6	2	3	1
Passaic County	17	9	5	3
Salem County	2	1	1	
Somerset County	26	12	4	10
Sussex County	2	1		1
Union County	28	9	6	13
Warren County	3	1	1	1

Work Experience

Of those who responded to the question on past work experiences, 291 had therapeutic dietetic experience, 194 had hospital administration experience, and 159 had teaching experience. Fifty of the respondents indicated experience in school lunch programs and 30 have had public health experience. There were 154 persons who were employed in occupations other than those related to the field of nutrition and dietetics. Four persons left this question unanswered.

Employment Status

Table 4 shows the employment status of dietitians and nutritionists, by county of residence. As anticipated, the greatest concentration of personnel is located in the most populous counties.

Intention to Return to Work

The unemployed individuals were questioned as to their intent to return to work. Of the 134 persons who were unemployed, eight planned to return to full-time work, 51 to part-time, 32 were uncertain, and 43 made no response to the question. A total of 24 persons planned to return to work within one year, 20 within two years, 11 within three years, and 20 others said they would be ready to return in five years.

Employment Preferred

A list of types of employment and community services was provided for a check-off by those who were unemployed but interested in returning to work. More than one type of service was checked by many of the respondents. Table 5 shows the number of respondents who indicated their preferences as to types of work.

Table 5. Type of Work or Community Service Selected If Change of Employment Status is Made

Type of Work	**Number of respondents indicating interest**
Diet counseling with patients referred by doctors	83
Consultation to nursing home and small hospitals	67
Hospital dietetics	49
Teach prenatal classes	45
Teach nutrition in schools of nursing and practical nursing	43
Manage school lunch programs	37
Head start programs, special education	35
Community nutrition classes for handicapped, homemakers, diabetics, arthritics, etc.	30
Teach nutrition and/or institution administration in junior colleges and vocational schools	30
Public health nutrition	26
Vocational training for food service workers and supervisor, home health aides	20
Other	11

Interest in Further Education by Highest Degree Held

Three-fourths of the respondents expressed interest in further education. The question was posed as to whether refresher courses, credit courses, or advanced degree courses were desired. Of the 196 persons wishing refresher courses, 146 held bachelor degrees, 49 held master degrees, and one held a doctorate. Interest in credit courses was indicated by 76 persons of whom 62 had bachelor degrees and 14 master degrees. Of the 123 individuals interested in obtaining advanced degrees, 26 held master degrees. Some of the respondents indicated interest in more than one type of further education. These combinations of choices are reflected in the above figures.

Courses Selected for Study

The respondents were offered a choice of several courses and asked which they would attend within 12 to 18 months. The overall totals requesting each type are listed in Table 6.

Table 6. Courses Selected for Further Education

Courses of Study	Number of Respondents Indicating Interest
Nutrition	102
Diet Therapy	135
Biochemistry	44
Quantity foods	37
Dietary consultation	159
Food purchasing	57
Equipment and layout	46
Personnel management	57
Sanitation	33
Teaching techniques	122
Menu planning	42
None	99
Other	37
No response	45

It was interesting to note which courses had top priority for those requesting refresher courses. A course in dietary consultation was checked by 114 persons and 100 desired a diet therapy refresher course. The third order of preference was teaching techniques with 78 persons indicating their interest. Nutrition was fourth highest and was checked by 76 respondents.

Considering requests for credit courses and advanced degree programs, 96 asked for training in teaching techniques, 88 for diet consultation, 81 for diet therapy, 64 for nutrition, and 52 for personnel management. About one-fourth or (102) respondents indicated they did not wish to enroll in courses within this given period.

Preferred Time for Attending Courses

In addition to the type of education and specific courses requested, respondents were asked the time they could best attend classes: day, late afternoon, evening, or summer school. Responses for this question have been classified by specific courses requested, to provide for the most efficient planning of course curriculum possible. In general, it was found that those who had an interest in refresher courses preferred the same time as those especially interested in credit courses. For example, the data show that of the persons interested in a diet therapy refresher course, 56 could come during the day, 36 in the late afternoon, 56 would be available for evening classes, and 12 could attend summer school. For advanced credit courses in diet therapy, four could come during the day, five in late afternoon, 18 would be available for evening classes, and five for summer school. The information obtained from this particular question will be of value to those in educational institutions who are in a position to plan and schedule courses to meet the needs of the profession.

Implementing the Data

Information obtained in this survey has already been used by District Nutrition Consultants for prospective employers looking for personnel and for personnel looking for job opportunities near their residence. The Nutrition Program together with the Community Nutrition and the Education Committees of the New Jersey Dietetic Association and the New Jersey Home Economics Association will:

1. Contact those persons who wished to return to work within one year to discuss in detail their current interest and availability.

2. Canvas the employment potential, by county, to assess the needs for dietitians and nutritionists to bring employers and professionals together.

3. Share the information on education and specific courses with educational institutions which are planning and scheduling courses in the areas needed.

This article was reprinted from April 1969 issue of

PUBLIC HEALTH NEWS

published by the New Jersey State Department of Health

APPENDIX-36

The New Jersey Society of Medical Technologists, Inc.

Affiliate of AMERICAN SOCIETY OF MEDICAL TECHNOLOGISTS

Finding A Way To Help Medical Technologists Return To Work

Recently, members of the Medical Technology Liaison Committee of the New Jersey Society of Medical Technologists and the New Jersey Society of Pathologists have been concerned about the growing shortage of medical technologists, particularly those who have become classified as "inactive".

Assistance in obtaining current information was requested and supplied through the Inactive Health Personnel Project, which is funded under a grant from the United States Public Health Service to the New Jersey State Department of Health. The overall objective of this project is to increase the supply of health manpower in New Jersey.

The information requested on the enclosed questionnaire is essential in order that significant facts may be obtained regarding the availability of medical technologists in New Jersey. This questionnaire offers you the opportunity to express your opinions regarding your problems and obstacles which you would encounter should you desire to return to active practice. The information you supply will assist us in working out a realistic plan to meet the needs expressed by you and your colleagues.

Your cooperation will be greatly appreciated, and we feel you will be making a valuable contribution to your profession. PLEASE complete and return the questionnaire and this letter by October 15, 1969 in the enclosed envelope. The State Department of Health will forward these returns to me, Mary C. Wethington, MT (ASCP), Chairman, Medical Technology Liaison, Com. of N.J.S.M.T. & N.J.S.P.

If you are not working and expect to return to active employment in a year or less, and/or would like to receive information on Refresher Courses that may be available within the next 12-18 month period please complete this portion of this page.

1. I hereby grant permission to release my name and address for employment.

   Yes ☐ No ☐

2. I hereby grant permission to release my name and address for refresher course information. Yes ☐ No ☐

Signature ______________________________

Address ______________________________

APPENDIX-37

ROSCOE P. KANDLE, M.D., M.P.H.
STATE COMMISSIONER OF HEALTH

CURTIS F. CULP, M.D.
ASSISTANT COMMISSIONER FOR HEALTH FACILITIES

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, N. J. 08625

1 County in which you reside? Zip Code

2 Age at last birthday 3. Home phone number

4 What is your educational background?

1. ☐ Baccalaureate degree
   - a. ☐ 4 yr. AMA Approved School of Medical Technology.
   - b. ☐ 3 yr. AMA Approved School of Medical Technology.
2. ☐ Baccalaureate degree plus five yrs. experience.
3. ☐ Three yrs. (90 semester hrs. or equivalent) college or university plus 1 yr. AMA Approved School of Medical Technology.
4. ☐ Two yrs. (60 semester hrs. or equivalent) college or university plus 1 yr. AMA Approved School of Medical Technology.
5. ☐ Two yrs. (60 semester hrs. or equivalent) plus 6 months training in a School of Cytotechnology, plus 6 months experience in cytotechnology.
6. ☐ High school graduate plus six months training cytotechnology.
7. ☐ Other

5 What higher degrees do you hold? ☐ Masters ☐ PhD ☐ Other

6 Are you now or have you ever been a member of the American Society of Medical Technologists?
☐ Yes ☐ No

7 Employment Status. Please check the ONE item which most nearly represents your situation.
1. ☐ Employed full-time as Medical Technologist. 2. ☐ Employed part-time as Medical Technologist. 3. ☐ Not gainfully employed. 4. ☐ Employed but not as Medical Technologist.

8 Number of years work experience ☐ 1-4 ☐ 5-9 ☐ 10-14 ☐ 15 or more

9 Major work experience?

	No. of Years		No. of Years
1. ☐ Hospital, Administration	______	5. ☐ Teaching-Hospital School of Medicine	______
2. ☐ Hospital, Staff Technologist	______	6. ☐ Teaching-C.L.A. Program	______
3. ☐ Public Health Laboratory	______	7. ☐ Other (Specify)	______
4. ☐ Industry	______		

10 Registration by American Society of Clinical Pathologists Board of Registry category.
1. ☐ MT (ASCP) 2. ☐ HT (ASCP) 3. ☐ BB (ASCP) 4. ☐ CT (ASCP) 5. NM (ASCP) 6. ☐ M(ASCP)
7. ☐ C (ASCP) 8. Registry Number ______ 9. Year received ______.

11 How long has it been since you worked as a Medical Technologist? __________ years

12 Select from the reasons below the ONE you consider most important for your not being presently employed.

1. ☐ Employment opportunites in my field are not available locally.
2. ☐ Employers cannot utilize the working hours I have available.
3. ☐ I cannot make suitable arrangements for my children.
4. ☐ Transportation is difficult to arrange.
5. ☐ I am enrolled as a student obtaining further preparation in medical technology.
6. ☐ The salary I would receive would not make it worthwhile.
7. ☐ I am not able to secure domestic help which would be needed if I returned to work.
8. ☐ Health does not permit my return to work.
9. ☐ I have not been active in my field for a while.
10. ☐ I prefer volunteer community activities.
11. ☐ I prefer to be at home while my children are still young.
12. ☐ I am no longer interested in this field as an occupation.
13. ☐ I am retired.
14. ☐ Other (Specify): ____________________

13 Do you expect to return to work in the medical technology field in the future?

1. ☐ Definitely yes. 2. ☐ Probably yes 3. ☐ Uncertain 4. ☐ Definitely no
5. ☐ Probably no.

NOTE: If you checked 1 or 2 above, answer all the remaining questions. If you checked 3, 4, 5, DO NOT complete the remaining questions. In either case please SIGN and RETURN this questionnaire and the accompanying letter.

14 How soon do you intend to return to work? Less than 1 year OR in ________ years.

15 When you return, will you work: 1. ☐ Full-time 2. ☐ Part-time 3. ☐ Uncertain

16 Do you have a car available: 1. ☐ Yes 2. ☐ No.

17 How far from home are you willing to travel? No. of miles __________

18 Within the 12 to 18 months would you be interested in participating in a program that would prepare you to work in a CURRENT HOSPITAL MEDICAL LABORATORY? 1. ☐ Yes 2. ☐ No

19 In what type(s) of further education are you interested?

1. ☐ Refresher course(s) 2. ☐ Credit course(s) 3. ☐ Advanced degree 4. ☐ None

20 What course(s) would you attend within the next 12 to 18 months if available:

1. ☐ Bacteriology
2. ☐ Blood Bank
3. ☐ Chemistry - Biochemistry
4. ☐ Education - Medical Technology
5. ☐ Hematology
6. ☐ Histology
7. ☐ Immunology
8. ☐ Laboratory Management
9. ☐ Mycology
10. ☐ Parasitology
11. ☐ None
12. ☐ Other (Specify)

21 When could you attend course(s)?

1. ☐ Day 2. ☐ Late Afternoon 3. ☐ Evening 4. ☐ Summer School 5. ☐ Saturdays
6. ☐ Could not attend.

22 In which of the following positions would you prefer to work?

1. Medical Technologist in:
   a. ☐ Chemistry b. ☐ Bacteriology c. ☐ Serology d. ☐ Blood Bank
   e. ☐ Histopathology f. ☐ Hematology
2. ☐ General
3. ☐ Rotation
4. ☐ Chief Medical Technologist
5. ☐ Teaching Supervisor
6. ☐ Uncertain
7. ☐ Other (Specify) ____________________

23 Please check ONE of the following fields in which you would most like to work.

1. ☐ Hospital 2. ☐ Private Laboratory 3. ☐ Industry 4. ☐ Public Health Laboratory
5. ☐ Other (Specify)__________

24 Is your address as shown on this questionnaire correct? ☐ Yes ☐ No. If not, please indicate your correct address.

____
Signature

REMARKS:

INACTIVE HEALTH PERSONNEL PROJECT

Medical Technology

The Medical Technology Liaison Committee of New Jersey Society of Medical Technologists and New Jersey Society of Pathologists' concern about the shortage of medical technologists created an interest in those classified as inactive.

The committee affirmed the importance of retraining programs for the inactive medical technologists who have been away for a number of years, and would like to work again, but lack of confidence because of changes in methodology.

Attempts had been made in other sections of the country to have retraining programs but numerous difficulties were encountered and in a number of cases programs were not feasible. However, the members of the committee felt it worthwhile to try to relate to the problem on a statewide basis. General information on the pilot project for inactive nurses of the Inactive Health Personnel Project was reviewed and it appeared that a similar survey of the inactive medical technologist would provide the necessary information for future planning of retraining programs.

Mrs. Geraldine R.S. Schiavone's and the Inactive Health Personnel Project Planning Committee's generous cooperation, assistance and guidance were invaluable in the preparation of the survey questionnaire.

The questionnaire was mailed the first of September to the medical technologists certified by the Board of Registry of the American Society of Clinical Pathologists in New Jersey. October 15 was set as the deadline, but due to the fact that the questionnaires continued to return after the deadline, it was extended to October 31.

A member of the Medical Technology Liaison Committee graciously consented to tabulate the data and prepare a statistical summary.

At the October 23 meeting of the Medical Technology Liaison Committee the data of the returns received to date were reviewed, discussed and assessed. An analysis of the data indicated there was a significant interest in returning to employment and a correlated interest in retraining programs.

Miss Dallas Johnson, Executive Director of National Committee for Careers in Medical Technology, has expressed considerable interest in the New Jersey project, made frequent inquiries concerning its progress and expressed an interest in offering assistance to expand the program.

THE NATIONAL COMMITTEE FOR CAREERS IN MEDICAL TECHNOLOGY

The National Committee for Careers in Medical Technology was founded in 1953 for the purpose of increasing the number of qualified medical technologists in the United States. It grew out of a committee of medical technologist in the United States. It grew out of a committee of medical technologists and pathologists to develop a medical technology recruitment film. It is financed jointly by the American Society of Clinical Pathologists, College of American Pathologists, American Society of Medical Technologists, with grants from the American Cancer Society.

Although the initial function was recruitment, its activities have since been expanded to include projects such as career opportunities for disabled, pilot laboratory assistants teacher education institute programs, a cytotechnology film and manual, promotion of scholarship projects and one of the latest is the back-to-work project.

In 1967, a back-to-work project was financed by the Bureau of Health Manpower, Public Health Service. This pilot project simply matched inactive technologists interested in returning to work to American Medical Association approved school and laboratories willing to undertake refresher training. The results were not very good. Analysis revealed that: 1) the technologists wanted and need structural review courses; 2) such courses needed financing; 3) so did the technologists to help them meet home responsibilities and concentrate on the intensive relearning experience; and 4) above all, they needed confidence.

This project led to the publication of "Curriculum Guidelines for Retraining in Medical Technology", which is an excellent manual for retraining programs.

Recently the National Committee for Careers in Medical Technology signed a $31,000 contract with U.S. Department of Labor for the purpose of recruiting inactive medical technologists and to encourage training programs.

A meeting was held October 27, 1969 at 2:00 p.m. at the Newarker Resturant, Newark Airport of representatives of the National Committee for Careers in Medical Technology, members of Medical Technology Liaison Committee and a representative of the Hospital Research and Educational Trust of New Jersey.

The purpose of the meeting was to explore ways and means NCCMT could be of assistance in expanding the medical technology inactive personnel project.

A review of the data and partial statistical analysis indicated there were a number of blocks and barriers to employment, that medical technologists were interested in returning to work and desired retraining courses.

Mr. Philip Morgan, Vice-President, Hospital Research & Educational Trust consented to act as coordinator of the program in cooperation with NCCMT.

A meeting of representative of the Medical Technology Liaison Committee and Mr. Morgan has been scheduled for November 25th to formulate and develop plans for retraining courses.

Number of questionnaires mailed to Medical Technologists MT (ASCP) in New Jersey.

Members of N.J.S.M.T.		206
Non-Members of N.J.S.M.T.		704
	Total	910

NUMBER OF MEDICAL TECHNOLOGISTS CONTACTED IN NEW JERSEY RESPONDING AS TO EMPLOYMENT STATUS

Employment full time as Med. Tech.	164
Employed part time as Med. Tech.	50
Not gainfully employed	166
Employed, but not as Med. Tech.	46
Returned address unknown	24
Returned--Moved out of state	34
Returned--Deceased	2
Total Responding	486

NUMBER OF MEDICAL TECHNOLOGISTS NOT EMPLOYED FULL TIME AS MEDICAL TECHNOLOGISTS CONTACTED IN NEW JERSEY BY COUNTY

COUNTY	NUMBER
Monmouth	16
Hunterdon	2
Mercer	10
Middlesex	29
Bergen	34
Camden	27
Glouchester	8
Essex	23
Burlington	15
Atlantic	5
Morris	23
Union	19
Somerset	17
Passaic	17
Salem	1
Sussex	3
Warren	1
Cumberland	2
Hudson	2
Ocean	7
Total Number	262

AVERAGE AGE OF MEDICAL TECHNOLOGISTS NOT EMPLOYED FULL TIME AS MEDICAL TECHNOLOGISTS ____ BY COUNTY

COUNTY	AVERAGE AGE
Monmouth	29
Hunterdon	29
Mercer	31
Middlesex	32
Bergen	36
Camden	36
Glouchester	32
Essex	34
Burlington	34
Atlantic	29
Morris	37
Union	35
Somerset	32
Passaic	35
Salem	35
Sussex	30
Warren	30
Cumberland	32
Hudson	32
Ocean	36
Total average =	32.8

NUMBER OF MEDICAL TECHNOLOGISTS NOT EMPLOYED FULL TIME CONTACTED IN NEW JERSEY AS TO REASONS FOR NOT BEING EMPLOYED FULL TIME

1.	Employment opportunities in my field are not available locally.	2
2.	Employers cannot utilize the working hours I have available.	14
3.	I cannot make suitable arrangements for my children.	17
4.	Transportation is difficult to arrange.	2
5.	I am enrolled as a student obtaining further preparation in medical technology.	0
6.	The salary I would receive would not make it worthwhile.	25
7.	I am not able to secure domestic help which would be needed if I returned to work.	3
8.	Health does not permit my return to work.	4
9.	I have not been active in my field for a while.	19
10.	I prefer volunteer community activities.	3
11.	I prefer to be at home while my children are still young.	114
12.	I am no longer interested in this field as an occupation.	9
13.	I am retired.	2
14.	Other.	21

Number and percent of Medical Technologists not employed full-time as Medical Technologists contacted in New Jersey according to primary reason for being inactive and intention to return to full-time employment as Medical Technologists.

Primary Reason For Not Being Employed Full-Time	Total Medical Technologists		Intention									
			Return Definitely Yes		Return Probably Yes		Return Probably No		Return Definitely No		Return Uncertain or No Response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total Responses	262	100.0%										
REASONS												
#2-Employers cannot utilize the working hours I have available	14	100.0%	6	42.8%	6	42.8%	0	0.0%	1	7.2%	1	7.2%
#3-I cannot make suitable arrangements for my children	17	100.0%	5	29.4%	9	52.9%	0	0.0%	1	8.85%	1	8.85%
#6-The salary I would receive would not make it worthwhile	25	100.0%	4	16.0%	12	48.0%	5	20.0%	1	4.0%	3	12.0%
#9-I have not been active in my field for a while	19	100.0%	2	10.5%	11	57.9%	1	5.3%	0	0.0%	5	26.3%
#11-I prefer to be at home while my children are still young	114	100.0%	15	13.2%	53	46.4%	9	7.9%	6	5.3%	31	27.2%
#14-Other	21	100.0%	7	33.3%	9	42.4%	1	5.0%	3	14.3%	1	5.0%
Other Listed Reasons	25	100.0%	2	8.0%	7	28.0%	3	12.0%	5	20%	8	32.0%
No Response to Reasons	26	100.0%	1	3.85%	0	0.0%	1	3.85%	0	0.0%	24	92.3%

Number and Percent of Medical Technologists not employed full-time as Medical Technologists contacted in New Jersey according to the number of years since full-time employment and intention to return to work.

Number of Years Since Full-Time Employment	Total Medical Technologists		Intention									
			Return Definitely Yes		Return Probably Yes		Return Uncertain		Return Probably No		Return Definitely No	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total Responses	238	100.0%										
0-4 Years	109	100.0%	25	22.9%	51	46.8%	21	19.3%	5	4.6%	7	6.4%
5-9 Years	66	100.0%	9	13.6%	29	43.0%	18	27.2%	6	9.1%	4	6.1%
10-14 Years	26	100.0%	1	3.85%	10	38.5%	11	42.3%	3	11.5%	1	3.85%
15 or more yrs.	30	100.0%	3	10.0%	8	26.7%	9	30.0%	7	23.3%	3	10.0%

Number and percent of Medical Technologists not employed full-time as Medical Technologists contacted in New Jersey according to the number of years of experience and intention to return to work.

Number of Years of Work Experience	Total Medical Technologists		Intention									
			Return Definitely Yes		Return Probably Yes		Return Uncertain		Return Definitely No		Or No Response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total Responses	262	100.0%										
0-4 Years	132	100.0%	19	14.4%	58	43.9%	36	27.3%	9	6.8%	10	7.6%
5-9 Years	81	100.0%	18	22.2%	28	34.6%	15	18.5%	5	6.2%	15	18.5%
10-14 Years	23	100.0%	3	13.0%	5	21.7%	4	17.3%	3	13.0%	3	35.0%
15 or more Years	26	100.0%	1	3.9%	6	23.1%	3	11.5%	4	15.4%	12	46.1%

NUMBER AND PERCENT OF MEDICAL TECHNOLOGISTS NOT EMPLOYED FULL
TIME AS MEDICAL TECHNOLOGISTS CONTACTED IN NEW JERSEY ACCORDING
TO DESIRE TO ATTEND REFRESHER COURSE WITHIN 12-18 MONTHS
AND NUMBER OF YEARS SINCE FULL TIME EMPLOYMENT AS MEDICAL TECHNOLOGISTS

Number of Years Since Full Time Employment	Total Medical Technologists		Desire to Attend Refresher Course					
			Yes		No		No Response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total Responses	230	100.0%						
0-4 Years	111	100.0%	34	31%	38	34%	39	35%
5-9 Years	64	100.0%	24	37.5%	13	20.3%	27	42.2%
10-14 Years	26	100.0%	10	38.5%	3	11.5%	13	50%
15 or More	29	100.0%	10	34.5%	0	0.0%	19	65.5%

Number and Percent of Medical Technologists not employed full-time contacted in New Jersey according to number of years until expected return to Employment and desire to participate in a refresher program within 12-18 months.

Expected Time of Return in Years	Total Medical Technologists		Desire to Take Refresher Course in 12-18 Months					
			Yes		No		No Response	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total Responses	262	100.0%						
Less than 1 Year	25	100.0%	17	68.0%	6	24.0%	2	8.0%
1-4 Years	71	100.0%	44	62.0%	23	32.4%	4	5.6%
5-9 Years	18	100.0%	3	16.7%	14	77.8%	1	5.5%
Over 15 Years	0	100.0%	0	-	0	-	0	-
No Response	148	100.0%	16	10.8%	10	6.8%	122	82.4%

Number of Medical Technologists not employed full-time contacted in New Jersey responding to what courses they would attend within the next 12 to 18 months if available.

COURSE	NUMBER WHO WOULD ATTEND
1. Bacteriology	52
2. Blood Bank	35
3. Chemistry - Biochemistry	59
4. Education - Medical Technology	37
5. Hematology	66
6. Histology	14
7. Immunology	25
8. Laboratory Management	23
9. Mycology	14
10. Parasitology	18
11. None	25
12. Other	11

Note: Most technologists indicated a desire to attend more than 1 course. Courses listed under other by the responding medical technologists were: General Refresher, Art Teaching, Mycoplasm Studies, Research Techniques, Tissue Cultures and Automation.

Number of Medical Technologists not employed full-time contacted in New Jersey responding to when they could attend course.

TIME	NUMBER WHO COULD ATTEND
1. Day	47
2. Late Afternoon	9
3. Evening	78
4. Summer School	9
5. Saturdays	31
6. Could not attend	18

Note:

Some technologists indicated that they could attend more than one time period.

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Number of Medical Technologists not employed full time contacted in New Jersey who responded granting permission to release name and address for employment and who responded granting permission to release name and address for refresher course information by county.

County	Employment Release #	Refresher Course Release #
Atlantic	1	2
Bergen	7	15
Burlington	2	11
Camden	2	8
Cumberland	0	0
Essex	2	7
Glouchester	0	2
Hudson	1	0
Hunterdon	0	2
Mercer	2	2
Middlesex	4	8
Monmouth	5	8
Morris	3	9
Ocean	1	3
Passaic	1	5
Salem	2	2
Somerset	1	2
Sussex	2	2
Union	4	10
Warren	0	1
Total Number for New Jersey	40	67

APPENDIX-39

NEW JERSEY
OCCUPATIONAL THERAPY ASSOCIATION

Dear Occupational Therapist:

October 1969

In this year, 1969, your profession needs you more than ever. The shortage of health manpower personnel has become critical throughout the United States, as well as in the State of New Jersey.

New legislative programs such as Medicare have greatly increased the demands for professionally qualified occupational therapists on a full-time, part-time, or consultation basis. Therefore, with the assistance of the Inactive Health Personnel Project, which is funded under a grant from the United States Public Health Service to the New Jersey State Department of Health, we are in the process of updating our current occupational therapy roster.

The primary purpose of this survey is to increase the supply of health manpower, by identifying the occupational therapists who are not now active, and by finding out what needs to be done to return them to active employment. At the same time, in order to plan soundly for the future, it is essential to have pertinent information supplied by the occupational therapists presently employed.

Whether you are or are not presently employed, please complete and return the questionnaire in the enclosed envelope by November 15. The information will be kept confidential and no data will be released without your permission. Your cooperation in this survey is greatly appreciated.

Very truly yours,

Claire Glasser

(Mrs.) J. L. Glasser, O.T.R., Chairman,
Inactive Personnel Survey Committee

IF YOU ARE NOT WORKING AND EXPECT TO RETURN TO ACTIVE EMPLOYMENT IN A YEAR OR LESS, PLEASE COMPLETE THE BOTTOM PORTION OF THIS PAGE.

1. I would be interested in learning about job opportunities in my area.

Yes ☐ No ☐

2. I grant permission to release my name and address for employment opportunities.

Yes ☐ No ☐

Signature ______________________________

APPENDIX-40

ROSCOE P. KANDLE, M.D., M.P.H.
STATE COMMISSIONER OF HEALTH

CURTIS F. CULP, M.D.
ASSISTANT COMMISSIONER FOR HEALTH FACILITIES

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, N. J. 08625

1 County in which you reside: ____ Zip Code: ____

2 Age at last birthday: ____ 3 Home phone number ( ) ____

4 What degree(s) do you hold:

	Degree	Major	Date
1 ☐	Baccalaureate		
2 ☐	Masters		
3 ☐	Doctorate		

5 Major work experience:
1 ☐ General Hospital
2 ☐ Psychiatric Hospital
3 ☐ Rehabilitation Center
4 ☐ C. P. Center
5 ☐ Nursing Home
6 ☐ Home Health Agency
7 ☐ School
8 ☐ Private Practice
9 ☐ Other (Specify) ____

6 Number of years work experience: ☐ 1-4 ☐ 5-9 ☐ 10-14 ☐ 15 or more

7 Present position if now working ____
Last position if now unemployed. ____

8 Employment status:
1 ☐ Full-time occupational therapist
2 ☐ Part-time occupational therapist
3 ☐ Volunteer occupational therapist
4 ☐ Employed in another field (specify) ____
5 ☐ Not employed

9 If you are now employed as a full-time or part-time occupational therapist, are you working in:
1 ☐ New Jersey 2 ☐ New York 3 ☐ Pennsylvania
4 ☐ Other (specify)

10 Do you have supervision responsibilities? ☐ Yes ☐ No
If yes, explain:

11 Do you have consultation responsibilities? ☐ Yes ☐ No
If yes, explain:

12 What percentage of your time is spent in:
1 Salaried institution ____
2 Private and/or contractual work ____

13 In what types of further education are you interested?
1 ☐ Seminars
2 ☐ Workshops
3 ☐ Credit Courses
4 ☐ Advanced degree
5 ☐ None

14 When could you attend courses?
1 ☐ Day
2 ☐ Late Afternoon
3 ☐ Evening
4 ☐ Summer School
5 ☐ Could not attend

15 What course(s) would you attend within the next 12-18 months if available:
1 ☐ Supervision
2 ☐ Consultation
3 ☐ Administration
4 ☐ Teaching Techniques
5 ☐ Neuro-Physiology
6 ☐ Prosthetics
7 ☐ Cerebral Palsy
8 ☐ Orthotics
9 ☐ Stroke
10 ☐ P.N.F.
11 ☐ Review basic O.T. Technique
12 ☐ Perceptual Motor Techniques
13 ☐ Other (specify) ____

16 Are you interested in: 1 ☐ Changing Employment 2 ☐ Returning to Work

If "yes" to 1 or 2, what type of work would you consider?

1 ☐ General Hospital
2 ☐ Psychiatric Hospital
3 ☐ Rehabilitation Center
4 ☐ C.P. Center
5 ☐ Nursing Home
6 ☐ Home Health Agency
7 ☐ School
8 ☐ Private Practice
9 ☐ Other (specify) ______

17 Are you currently registered by A.O.T.A.? ☐ Yes ☐ No

THE FOLLOWING QUESTIONS SHOULD BE ANSWERED ONLY BY THOSE WHO ARE NOT EMPLOYED AT THE PRESENT TIME. IN EITHER CASE, PLEASE SIGN AND RETURN THIS QUESTIONNAIRE.

18 How long has it been since you worked as an occupational therapist? Number of Years:

19 Select from the reasons below the ONE you consider most important for your not being presently employed:

01 ☐ Employment opportunities in my field are not available locally.
02 ☐ Employers cannot utilize the working hours I have available.
03 ☐ I cannot make suitable arrangements for my children.
04 ☐ Transportation is difficult to arrange.
05 ☐ I am enrolled as a student working toward an advanced degree.
06 ☐ The salary I would receive would not make it worthwhile.
07 ☐ I am not able to secure domestic help which would be needed if I returned to work.
08 ☐ Health does not permit my return to work.
09 ☐ I have not been active in my field for a while.
10 ☐ I prefer volunteer community activities.
11 ☐ I prefer to be at home while my children are young.
12 ☐ I am no longer interested in this field as an occupation.
13 ☐ I am retired.
14 ☐ Other (please specify) ______

20 Do you expect to return to work in the occupational therapy field in the future?

1 ☐ Definitely Yes
2 ☐ Probably Yes
3 ☐ Uncertain
4 ☐ Definitely No
5 ☐ Probably Not

NOTE: IF YOU CHECKED ANSWER 1, 2, OR 3, ANSWER ALL THE REMAINING QUESTIONS. IF YOU CHECKED 4 OR 5, DO NOT COMPLETE THE REMAINING QUESTIONS. IN EITHER CASE, PLEASE SIGN AND RETURN THIS QUESTIONNAIRE.

21 Would you be interested in attending:

1 ☐ A workshop to learn more about increasing opportunities for part-time employment.
2 ☐ A refresher program preparing you to return to current occupational therapy practice.

22 How soon do you intend to return to work?

☐ Less than one year, or in ______ years.

23 When you return, will you work:

1 ☐ Full-time 2 ☐ Part-time 3 ☐ Uncertain

24 Do you have a car available? ☐ Yes ☐ No

25 How far from home are you willing to travel? Number of miles:

26 Is your address as shown on this questionnaire correct? ☐ Yes ☐ No

If not, please indicate your correct address below.

ADDRESS CHANGE:

Mr.
Mrs.
Miss

Signature

REMARKS:

APPENDIX-41

INACTIVE HEALTH PERSONNEL PROJECT

OCCUPATIONAL THERAPY

November 7, 1969

October 15, 1969: 286 questionnaires sent to all occupational therapists living in New Jersey

October 30, 1969: 117 questionnaires, or 41% returned. Data tabulated below.

- -

Present Employment Status:

41	35%	Full-time occupational therapist
21	18%	Part-time occupational therapist
1	1%	Volunteer occupational therapist
2	2%	Volunteer in other fields
14	12%	Employed in other fields
36	30%	Not employed
2	2%	Employed in other fields and part-time O.T. Consultant
117	100%	

Of those who are employed in other fields:

6	Teaching
1	Secretary
1	Coordinator of rehabilitation center
1	Executive director of sheltered workshop
1	Court clerk
1	Communications director
2	Unspecified
1	Hospital administrator
14	

Those who are not employed, gave the following as the most important reason for being unemployed:

22	Prefer to be at home while children are young
4	Cannot make suitable arrangements for care of children
1	Employer cannot utilize working hourse available
1	Working toward an advanced degree
1	Feels that the salary she would receive would not make working worthwhile
1	Has not been active in the field for a while
1	Prefers volunteer community activities
1	Retired
4	Other
36	

Those 36 presently unemployed, responded as follows, when asked whether they expect to return to work in the occupational therapy field:

7	Definitely yes
16	Probably yes
9	Uncertain
1	Definitely no (retired)
1	Probably no
2	No answer given
36	

Of those 36 presently unemployed:

9	Would be interested in attending a workshop to learn more about increasing opportunities for part-time employment
10	Would be interested in attending a refresher course to prepare them for return to current occupational therapy practice
10	Would like both the workshop and the refresher course
7	Are not interested in either
36	

When the 36 presently unemployed plan to return to work:

4	Less than a year
12	1-3 years
7	4-6 years
3	Over 6 years
1	1-5 years
9	No answer given
36	

Of those 36 presently unemployed:

0	Plan to return to full-time work
20	Plan to return to part-time work
12	Uncertain
4	No answer given
36	

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APPENDIX-42

ROSCOE P. KANDLE, M.D., M.P.H.
STATE COMMISSIONER OF HEALTH

CURTIS F. CULP, M.D.
ASSISTANT COMMISSIONER FOR HEALTH FACILITIES

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, N. J. 08625

STAND UP AND BE COUNTED!

YOUR PROFESSION NEEDS YOU!!!

In January 1965 the New Jersey State Department of Health in cooperation with the New Jersey Chapter of the American Physical Therapy Association surveyed the professionally qualified physical therapists living in New Jersey asking for information on educational and employment status and interest in continued educational courses.

In the past four years there have been increasing demands for professionally qualified physical therapists on a full-time, part-time, or consultation basis. Therefore, with the assistance of the Inactive Health Personnel Project, which is funded under a grant from the United States Public Health Service to the New Jersey State Department of Health, we are in the process of updating our current physical therapy roster.

The primary purpose of this survey is to increase the supply of health manpower, by identifying the physical therapists who are not now active and in finding out what needs to be done to return them to the active labor force. At the same time, in order to plan soundly for the future, it is essential to have pertinent information supplied by the physical therapists presently employed. Your cooperation in this survey would be appreciated.

Whether you are or are not presently employed, please complete and return the questionnaire in the enclosed envelope by November 1. The information will be kept confidential and no data will be released without your permission.

(Miss) Susan B. Glocke
State Physical Therapy Consultant, Health

- -

If you are not working and expect to return to active employment in a year or less, please complete the bottom portion of this page, including your signature, and return it with your questionnaire.

1. I would be interested in learning about job opportunities in my area.

   Yes ☐ No ☐

2. I grant permission to release my name and address for employment opportunities.

   Yes ☐ No ☐

SIGNATURE ______________________________

APPENDIX-43

ROSCOE P. KANDLE, M.D., M.P.H.
STATE COMMISSIONER OF HEALTH

CURTIS F. CULP, M.D.
ASSISTANT COMMISSIONER FOR HEALTH FACILITIES

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA, P.O. BOX 1540, TRENTON, N. J. 08625

1. County in which you reside? Zip Code
2. Age at last birthday
3. Home phone number ( )
4. What degree(s) do you hold? (Indicate Major)
   ☐ 1. Baccalaureate ( ) ☐ 2. Masters ( ) ☐ 3. Doctorate ( )
5. Major Work Experience:
   1. ☐ General Hospital
   2. ☐ Home Health Agency
   3. ☐ Rehabilitation Center
   4. ☐ Own Office
   5. ☐ C.P. Center
   6. ☐ Nursing Home
   7. ☐ Doctor's Office
   8. ☐ School
   9. ☐ Other (specify) ____________
6. Number of years work experience ☐ 1-4 ☐ 5-9 ☐ 10-14 ☐ 15 or more
7. ☐ Present or ☐ last position(s) held ____________
8. Employment status
   ☐ Full time as a Physical Therapist
   ☐ Part-time as a Physical Therapist
   ☐ Not gainfully employed
   ☐ Other (specify) ____________
9. Do you have supervision responsibilities ☐ Yes ☐ No
   If yes, explain: ____________
10. Do you have consultation responsibilities ☐ Yes ☐ No
    If yes, explain: ____________
11. What percentage of your time is spent in
    a. Salaried institution ____________
    b. Private and/or contractual work ____________
12. Have you left a hospital position since January 1966?
    If yes, why: ____________
13. In what type(s) of further education are you interested?
    ☐ 1. Seminar(s) ☐ 2. Credit Course(s) ☐ 3. Advanced degree ☐ 4. None

14. When could you attend course(s)?

☐ 1. Day ☐ 2. Late afternoon ☐ 3. Evening ☐ 4. Summer School ☐ 5. Could not attend

15. What course(s) *would* you attend within the next 12-18 months if available:

1. ☐ Supervision
2. ☐ Consultation
3. ☐ Administration
4. ☐ Teaching Techniques
5. ☐ Neuro-physiology
6. ☐ Prosthetics
7. ☐ Cerebral Palsy
8. ☐ Orthotics
9. ☐ Stroke
10. ☐ P.N.F.
11. ☐ Therapeutic Exercise
12. ☐ Review of Basic P.T. Techniques
13. ☐ Specify____________________

16. Are you interested in: a. ☐ Changing employment b. ☐ Returning to work
If "yes" to a or b, what type of work would you consider?

1. ☐ General Hospital
2. ☐ Home Health Agency
3. ☐ Rehabilitation Center
4. ☐ Own office
5. ☐ C.P. Center
6. ☐ Nursing Home
7. ☐ Doctor's office
8. ☐ School
9. ☐ Other (specify)____________________

17. Do you have a New Jersey physical therapy license? ☐ Yes ☐ No
If yes, give license number ____________________

The following questions should be answered ONLY by those who are *not employed* at the present time. In either case please SIGN and RETURN this questionnaire and accompanying letter.

18. How long has it been since you worked as a Physical Therapist? No. of years________________

19. Select from the reasons below the ONE you consider most important for your not being presently employed.

01 ☐ Employment opportunities in my field are not available locally.
02 ☐ Employers cannot utilize the working hours I have available.
03 ☐ I cannot make suitable arrangements for my children.
04 ☐ Transportation is difficult to arrange.
05 ☐ I am enrolled as a student obtaining further preparation in physical therapy.
06 ☐ The salary I would receive would not make it worthwhile.
07 ☐ I am not able to secure domestic help which would be needed if I returned to work.
08 ☐ Health does not permit my return to work.
09 ☐ I have not been active in my field for a while.
10 ☐ I prefer volunteer community activities.
11 ☐ I prefer to be at home while my children are young.
12 ☐ I am no longer interested in this field as an occupation.
13 ☐ I am retired.
14 ☐ Other (please specify)____________________

20. Do you expect to return to work in the physical therapy field in the future?

1. ☐ Definitely yes 2. ☐ Probably yes 3. ☐ Uncertain 4. ☐ Definitely No

5. ☐ Probably Not

NOTE: If you checked answer 1 or 2 answer all the remaining questions. If you checked 3, 4, or 5, DO NOT complete the remaining questions. In either case please SIGN and RETURN this questionnaire and the accompanying letter.

21. How soon do you intend to return to work? ☐ Less than 1 year OR in ____________ years.

22. When you return will you work: 1. ☐ Full time 2. ☐ Part-time 3. ☐ Uncertain

23. Do you have a car available? ☐ Yes ☐ No

24. How far from home are you willing to travel? No. of miles________________

25. Is your address as shown on this questionnaire correct? ☐ Yes ☐ No
If not, please indicate your correct address.

Mr.
Mrs.
Miss ______________________________
Signature

REMARKS:

APPENDIX-44

INACTIVE HEALTH PERSONNEL PROJECT

PHYSICAL THERAPY

1. Questionnaires sent out = 627
   Questionnaires returned = 333
   Returns upon which data tabulated = 53%

2. Of the 333 who returned the questionnaires, 90 or 27% said they were unemployed.

3. Of the 90 unemployed, 38 or 42% stated they planned to return to work on either a full or part-time basis.

NUMBER OF UNEMPLOYED PHYSICAL THERAPISTS WHO PLAN TO RETURN TO WORK

Total respondents = 90
Definitely yes = 12
Probably yes = 32
Uncertain = 23
* No response = 15

Definitely no = 3
Probably not = 6

* No response includes those who are retired or working in other positions.

3	Retired
1	Public Health Nurse
1	Graduate Student
3	In administrative positions other than Physical Therapy
2	School Teachers

Reasons for Physical Therapist Non-employment

37	I prefer to be at home while my children are young.
10	I cannot make suitable arrangements for my children.
7	Other (such as retired, administrative jobs and teaching).
6	The salary I would receive would not make it worthwhile.
4	I have not been active in my field for a while.
4	Health does not permit my return to work.
3	I am retired.
3	Employment opportunities in my field are not available locally.
1	I am not able to secure domestic help which would be needed if I returned to work.
1	I am enrolled as a student obtaining further preparation in physical therapy.
1	Employers cannot utilize the working hours I have available.
1	I prefer volunteer community activities.
78	TOTAL
12	NO RESPONSE

PHYSICAL THERAPY RESPONDENTS INTENDING TO RETURN TO WORK FULL OR PART TIME

Intention To Return To Work		Will Work	
	Full-time	Part-time	Uncertain
TOTAL	4	34	9
1 Year or Less	3	12	1
2 Years	1	5	3
3 Years	-	8	2
4 Years	-	2	1
5 Years or More	-	3	-
Uncertain	-	2	1
No Response	-	2	1